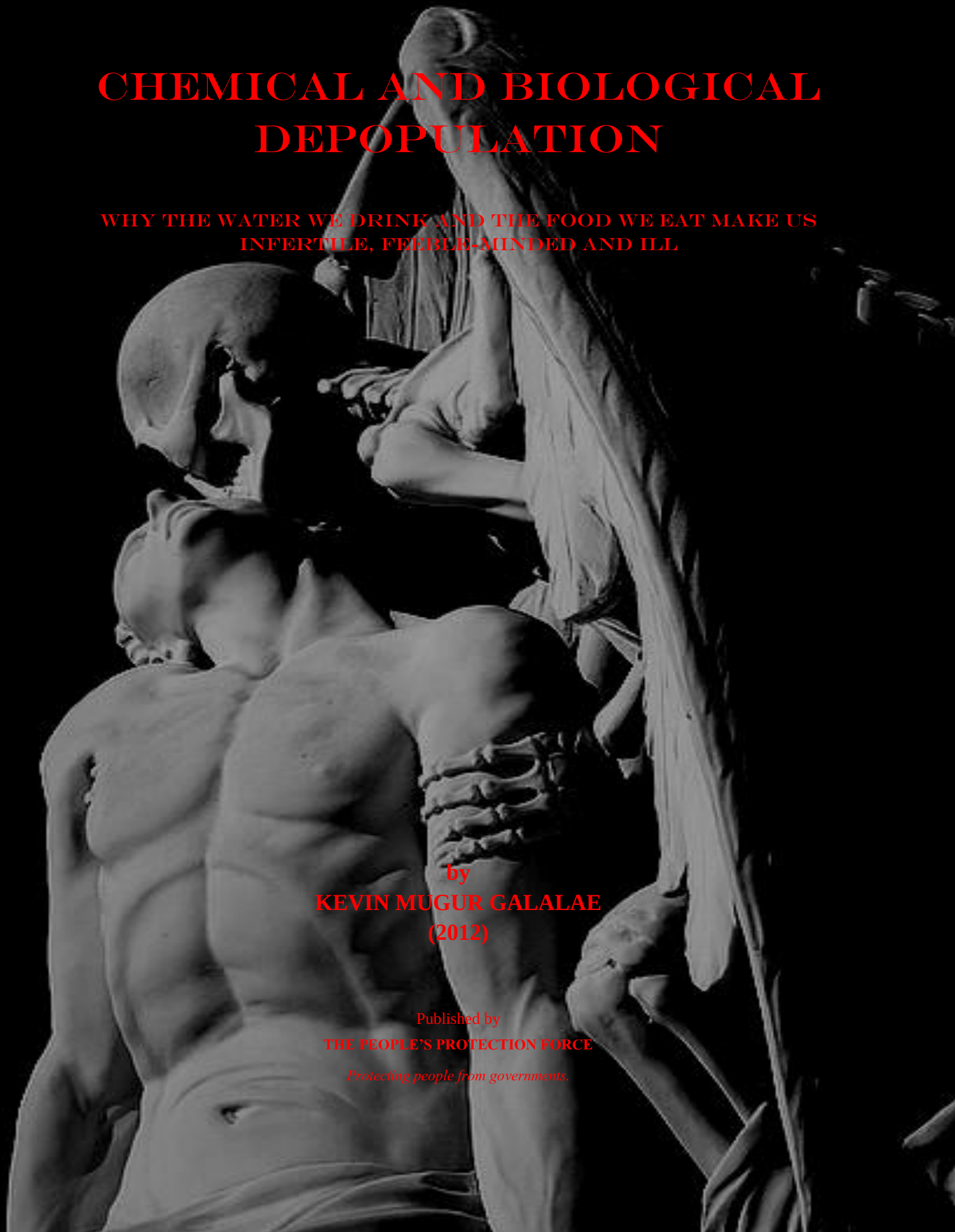
# CHEMICAL AND BIOLOGICAL DEPOPULATION

## WHY THE WATER WE DRINK AND THE FOOD WE EAT MAKE US INFERTILE, FEEBLE-MINDED AND ILL




**by**

**KEVIN MUGUR GALALAE**


**(2012)**


Published by

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### IT CONTAINS LIFE AND DEATH INFORMATION

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**Your life depends on it.**

# CHEMICAL AND BIOLOGICAL DEPOPULATION

## WHY THE WATER WE DRINK AND THE FOOD WE EAT MAKE US INFERTILE, FEEBLE-MINDED AND ILL

by
Kevin Mugur Galalae
(2012)

*Wherein I will prove beyond a reasonable doubt, through statistical, demographic and comparative data, that water, salt and milk fluoridation have been deliberately employed by governments throughout the world from the end of World War II onward for one and one purpose only, depopulation, and that as a result some 30% of the lineages subjected to fluoridation have been rendered infertile and have already died out or are in the process of dying out. This planned and scientifically-driven genocide, justified in the minds of our leaders by the overpopulation imperative, is a substitute for war, which has been made impossible by the mutually assured destruction of nuclear weapons. Over the past 60 years, the depopulation agenda has grown into a global program that involves the vast majority of the world's governments and the entire international community, the result of which there are few places in the world where our children can drink water and milk or eat salt without serious repercussions on their ability to procreate, the genetic quality of their offspring if they do succeed, their mental and intellectual integrity, and their general health. If allowed to continue, the fluoridation genocide will annihilate the majority of mankind within a few generations and reduce those who survive to mental retardation and severe genetic degradation, making life undesirable and long-term survival impossible. As of 2001, the war waged on us by our own governments has entered a new and far more destructive phase through the adoption of genetically modified organisms, the newest weapon of mass destruction in the arsenals of our governments. This new phase was augured by the staged and catalytic event of 9/11 and has our rapid annihilation, in advance of the impending oil shortage, as its objective. The time has come to put our leaders on trial for crimes against humanity, punish them severely for poisoning us and our children for sixty years, and change their murderous world order before we are too weak to resist. The time has also come to reclaim our bodies and our minds from government control and to use our freedom to exercise self-restraint on the reproductive front by virtue of a newfound global consciousness that is devoid of prejudices and driven solely by the love for our children and for the planet we share. Should we fail to rise to the occasion, we will deserve to be exterminated and by default allow those who could and did organize across borders, and who for better or worse did take proactive measures, inherit the Earth.*

*I dedicate this book to mankind and the cleansed world and age of innocence it will engender to my sons, Benjamin and Oliver Galalae, who have been torn away from me by the forces of evil that have aligned themselves against humanity. It is the love of my children and the struggle to be reunited with them that have given me the courage and the strength to confront the enemies of mankind.*

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## FOREWARD

This is undoubtedly the 21st century's most important book and I say this without a shred of doubt or hesitation. In fact, it is so important that history will have to be rewritten.

It is not its form that gives it this distinction, as every word you are about to read is a first draft and has yet to benefit from a revision, but its content. I wrote this book with a sense of desperate urgency over the course of two months, knowing that with every day that passes countless people will die unaware that they are under attack and that their bloodlines are about to be extinguished, and unable to protect themselves, their families and their children. By necessity this first draft is a record of my thought process more than a linear description.

Despite its shortcomings this book will save your life if you take it to heart and act upon it. It will help you bury your children knowing why and for what higher purpose if you choose to resign yourself and continue as before. At the very least, it will prepare you for the earth-shattering changes that are about to come and alter your world beyond recognition.

What you will discover are the details of an ongoing plan for global control and stabilization, its objectives, its multiple facets and its methods and means; a plan whose targets and enemy are us, the world's people. The master key I am about to give you will open the vault to the world's deepest held secrets. Once inside this altar of forbidden knowledge the incomprehensible actions of our leaders and the state of the world will become revealed as if in clear daylight and reality will once again make sense, though the reader's perception of it will forever be altered.

Those who would rather live and die in blissful ignorance should stop reading now. Those who want to know the truth, have the strength to face it, and want to save themselves and their families, should not expect to finish these pages and go back to their normal lives for that will no longer be possible.

# INTRODUCTION

Most of us have an intuitive feeling that something is not right with the world and that we are being lied to from all directions: government, media and international organizations. We are also aware that nothing works as it should and that the powers to be are making decisions that seem irrational, are clearly against our own best interests and lead to systemic collapse and universal hardship. What we cannot understand is why they are trying their utmost to destroy the existing social structures and to deceive us? You will find that answer here and will once again be able to make sense of the world around you and take control of your own destiny if and when you reach out to others and take responsibility.

The highest echelons of the world's political, economic and scientific communities, have for the past 60 years been pursuing a plan that is without precedent in both scope and boldness and that is as necessary as it is frightening and can be described as diabolically criminal and magnificently benevolent in the same breath and with the same degree of accuracy depending on whether you are an outsider or an insider, depending in other words if you have been scheduled to die or chosen to live.

Let it be known from the outset that I strongly approve the goal, which is rapid depopulation to save mankind from self-destruction and the planet from ecological collapse, but bitterly condemn the methods and that I will fight to my last breath to ensure that the goals are attained not by their plan but by ours, which I have already conceived as the only viable alternative and baptized OMOBOS, an acronym for Our Mind, Our Body, Our Soul.

This book poses a lethal danger to the world's power structures and will be censored by any and all means in an attempt to prevent you from knowing the truth and turning on our leaders who are responsible for the high crimes described therein. Bringing these mass murderers to justice will therefore depend on your willingness to share this document generously with others both digitally, through the Internet, and physically, from person to person.

In releasing this book my days are numbered and if I am not to be assassinated, like all those before me who have attempted to protect you, will depend entirely on how swiftly you send this historic document to everyone you know and how fast they in turn spread the word.

The truth will live or die with you.

**W**ater is the world's most precious and contested resource. Pressures on freshwater are rising due to the expanding needs of agriculture, industry, energy production, and household use.

Given its central importance to life on Earth, one would expect water to be treated as the sacred element it is and not as a commodity, least of all not as a dumping ground for toxic waste and as a weapon of population control and genetic degradation. Yet that is exactly how our governments view and use water with the full cooperation of the United Nations, the tacit consent of leaders and scientists worldwide and the international trans-governmental and non-governmental community.

By adding fluoride to the drinking water, the most important ingredient of life is compromised and turned into an instrument of control and a weapon of annihilation. Water fluoridation is used to achieve several objectives at the same time.

Initially, it served the US and Soviet military-industrial complexes as a convenient way to dispose of a toxic waste by-product used in large quantities by the aluminum industry and in even greater quantities to enrich uranium ever since America and the former Soviet Union built their first atomic bombs. With the help of fraudulent science and a massive public relations campaign, fluoride added to the drinking water in low concentrations was sold in the U.S. as a public health measure to combat tooth decay.[1] Grand Rapids, Michigan was the first American city to have its water fluoridated in 1945, while Stalin used it first on the Baltic republics starting as soon as World War II ended.

Despite public opposition, the U.S. Public Health Service made water fluoridation official policy in 1951. By 1960 water fluoridation reached 50 million or 30% of the American people and today that figure stands at over 230 million or 75% of the population. It is the only form of forced mass medication allowed in the US even though fluoride is known to be a dangerous toxin and consumers have from the beginning bitterly contested the legality, not to mention the sanity and morality, of adding it to water.

The Soviet Union adopted the American solution of waste disposal to their own nuclear program and industrial needs and before long the close allies of both superpowers, East and West, were doing their part by dumping fluoride into their citizens' drinking water.

In time, other industrial users of fluoride – the steel, oil and phosphate industries – jumped on the bandwagon and the industrial pollutants scrubbed from their smokestacks or left over as by-products were processed and dumped into public reservoirs across the United States and indeed across the world in the form of silicofluorides that contain traces of radioactive and toxic elements such as mercury, arsenic, barium, beryllium, cadmium, lead and copper.

[1] Christopher Bryson, *The Fluoride Deception*, Seven Stories Press, 2004.

By the 1960s, the United States and the Soviet Union, as well as Eastern and Western Europe, had had a chance to confirm fluoride's effectiveness in behavior control, which is what the Nazis had experimented with to keep prisoners docile and the Jews in the ghettos and in concentration camps in a state of bovine submission.[2] Of course, the Soviets had done the same to their prisoners since 1940.[3]

By the 1970s, they will have also confirmed fluoride's effectiveness in lowering fertility, which is about the time when Western and Eastern European countries began to realize the unintended side-effects of fluoridated water and quickly and quietly abandoned it for less destructive methods. By contrast, the U.S. and their Anglo-Saxon allies – Canada, Australia and New Zealand – intensified their water fluoridation campaigns and the Center for Disease Control, defying all scientific evidence, identified it as one of ten great public health achievements of the 20th century. Scientists whose research showed the ill-effects of fluoridation were purged from the system, especially if their data exposed the sterilizing effect of fluoridation, to ensure that opposition to the water fluoridation policy was kept under control and could not sway the general public to revolt.

One has to ask, how is it possible that the U.S. and its close Anglo-Saxon allies could come to a diametrically opposed conclusion than its European allies, when both had access to the same research data? What other considerations could have persuaded the U.S. to ignore the clear evidence of the damaging effects of fluoridation? The answer is they did not come to different conclusions, but that European countries switched to less overt and intrusive methods of fluoridation while the U.S. and its Anglo-Saxon allies stayed the course. This was partly dictated by political and partly by demographic considerations.

The answer therefore lies in America's unaccomplished demographic targets and in its responsibility as global standard setter and master planner. America could not push fluoridation on others without showing its willingness to use it herself. Most importantly, while Europe achieved its population control targets by the early 80s and the *total fertility rates* (TFR)[4] of every European country dropped below replacement level (i.e. two children per woman), the US did not. America's demography and foreign policy demanded the continuation of water fluoridation, the cheapest and most effective method of lowering fertility.

Demographers present the facts as follows:

> *"In striking contrast to the projected population shrinkage due to low fertility and negative population momentum in Europe, the U.S. population continues to be characterized by rapid growth. Almost 33 million people were added to the U.S. population between 1990-2000, corresponding to a growth of 13% during the 1990s, making it the greatest absolute 10-year population increase in U.S. history. The majority of this growth in recent years is attributed to*

[2] Joseph Borkin, The Crime and Punishment of I.G. Farben, Pocket, 1979.

[3] Mullins, Eustace, *Murder by Injection*, National Council for Medical Research, VA, 1988.

[4] The Total Fertility Rate, abbreviated as TFR, indicates the number of children born on average to every woman in a country.

*natural increase—that is, an excess of birth over deaths — while net immigration accounted for about 40% (Kent and Mather 2002) … The total fertility rate (TFR) among Hispanics in the U.S. was 2.75 in 2001, 35 percent higher than the national average of 2.03. The TFR of 2.10 for non-Hispanic Blacks in the same year was slightly above the national value, while non-Hispanic Whites, Asians/Pacific Islanders, and American Indians had below-average fertility level*
*The U.S. population is also projected to grow by almost 50% in the coming decades, including a 7% growth of the white non-Hispanic population, a 188% increase in the Hispanic population and a 213% increase in the Asian population until 2050."*[5]

Faced with a much younger, diverse and fecund population, high immigration and a demographic curb that forecasts total fertility rates to stay above replacement level until 2020, the U.S. decided to keep the water fluoridation program in place and expand it. To show solidarity and to solve their own demographic dilemmas, Canada, Australia and New Zealand, which are also high immigration countries but have already reached a TFR of 2 or less for their native inhabitants but not their new immigrants, have stayed the course and have not only kept their water fluoridation schemes in place, they too have expanded them.

The considerably negative side-effects of water fluoridation are accepted as a price worth paying for the leadership of the Anglo-Saxon camp, which confronts their people's increasing resistance with dishonest research that disregards all negative data and extols the one and only discernible benefit, namely that it reduces tooth decay.

Credible and ample research from within and especially outside the U.S. shows that fluoride has adverse effects on brain development, impairs learning and lowers children's intelligence; alters neurological development and is responsible for behavioral disorders like ADD and ADHD; increases risk of tooth straining and brittleness (dental fluorosis); causes bone cancer (osteosarcoma), bone and hip fractures, hormone disruption and premature puberty; has adverse effects on the male reproductive system, lowering fertility; and causes potentially dangerous gene mutations.[6]

The regulatory agencies of the countries that continue to use water fluoridation, however, continue to deny its ill-effects and publish periodic position statements that reinforce the policy[7], even though their own scientists publicly urge the government to change course[8] and former

[5] Hans-Peter Kohler, Francesco C. Billari and José A. Ortega (2006), "Low Fertility in Europe: Causes, Implications and Policy Options." In F. R. Harris (Ed.), *The Baby Bust: Who will do the Work? Who Will Pay the Taxes?* Lanham, MD: Rowman & Littlefield Publishers, pp. 48-109, http://www.ssc.upenn.edu/~hpkohler/papers/Low-fertility-in-Europe-final.pdf.
[6] *A Bibliography of Scientific Literature on Fluoride*, http://www.slweb.org/bibliography.html#learning.
[7] *Achievements in Public Health, 1900-1999: Fluoridation of Drinking Water to Prevent Dental Caries*, Centers for Disease Control & Prevention, October 1999, http://www.cdc.gov/mmwr/PDF/wk/mm4841.pdf. Michael W. Easley, *Fluoridation: A Triumph of Science Over Propaganda*, American Council on Science and Health, 1996, http://www.acsh.org/healthissues/newsid.724/healthissue_detail.asp.
[8] William Hirzy, *Why EPA's Headquarters Professionals' Union Opposes Fluoridation*, National Treasury Employees Union Chapter 280, May 1, 1999, http://www.nteu280.org/Issues/Fluoride/NTEU280-Fluoride.htm.

water fluoridation advocates and officials in and outside the U.S. have denounced the practice as irresponsible and unsafe.[9]

In 1999, more than 1,500 Environmental Protection Agency (EPA) employees concluded that:

> ***"****For governmental and other organizations to continue to push for more exposure in the face of current levels of over-exposure coupled with an increasing crescendo of adverse toxicity findings is irrational and irresponsible at best. Thus, we took the stand that a policy which makes the public water supply a vehicle for disseminating this toxic and prophylactically useless (via ingestion, at any rate) substance is wrong."* [10]

In 2000, during a Congressional investigation, EPA scientists called for a *"moratorium based on science indicating a number of adverse health effects and out-of-control, excessive exposures to fluoride".*

In 2002 and then again in 2003, they published statements of concern, pointing out that *"since 1978, a wealth of peer reviewed literature has been published on the carcinogenic, genotoxic and neurotoxic effects of fluoride" and asking for "a full, open debate on the merits of the science underpinning fluoridation, and EPA's drinking water standards".*[11]

In 2005, over 7,000 environmental and public health professionals within the EPA renewed their call on Congress to legislate a moratorium on drinking water fluoridation programs across the country on the strength of new research which links fluoridation with elevated risk of a fatal bone cancer in young boys. They stated that:

> *"Work done at Harvard College's School of Dental Medicine by Dr. Elise Bassin, which has been hidden since 2001, shows that pre-adolescent boys who drink fluoridated water are at a seven-fold increased risk of osteosarcoma, an often fatal bone cancer.*
>
> *Dr. Bassin's work, done as her doctoral thesis, was completed and accepted by Harvard in partial fulfillment of the requirements for her Ph.D. in 2001. It is a landmark investigation of age-specific exposure of young people in a case-control epidemiology study of the incidence of osteosarcoma. The thesis remained sequestered until 2004, when her research adviser, Chester Douglass, inexplicably reported to the funding agency, the National Institute of Environmental Health Sciences, that no connection was found between fluoride and osteosarcoma.*

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[9] John Colquhoun , *Why I Changed My Mind About Fluoridation*, Auckland, New Zealand. 1997, http://uncensored.co.nz/2009/12/07/why-i-changed-my-mind-about-water-fluoridation/. Paul Connett, *Fluoride: A Statement of Concern*, St. Lawrence University, 2000, http://www.slweb.org/soc1.pdf. Hardy Limeback, *Why I am now officially opposed to adding fluoride to drinking water*, University of Toronto, April 2000, http://fluoridefreesacramento.org/Why_I_Am_Now_Officially_Opposed_to_Adding_Fluoride_to_Drinking_Water.pdf.

[10] William Hirzy, Why EPA's Headquarters Professionals' Union Opposes Fluoridation , National Treasury Employees Union Chapter 280, May 1, 1999, http://www.nteu280.org/Issues/Fluoride/NTEU280-Fluoride.htm.

[11] NTEU Chapter 280, Record of appeals, http://nteu280.org/Issues/Fluoride/fluoridesummary.htm.

*It is simply unconscionable that her federally funded work was hidden for four years while millions of young boys continued to be exposed to increased risk of this disease, whose best outcome involves amputation."*[12]

With equal urgency, the 7,000 scientists and professionals also wrote to their agency's management asking them to recognize fluoride as a carcinogenic substance and set *"the maximum contaminant level goal for fluoride at zero"* pending the results of *"a report next year from the National Research Council on the propriety of its current drinking water standards for fluoride"* and reminding management that it is *"highly inappropriate for EPA to do nothing now that it is in possession of this science, while millions of young boys continue to be exposed unwittingly to the elevated risk of a fatal bone cancer as the Agency waits for the NRC to issue its report, then for the report to undergo peer review, and then for the Agency to undertake its own deliberations.*"[13]

Neither Congress nor the EPA took heed of the warnings issued by America's scientists and instead of abolishing water fluoridation they expanded it nationally from 60% to 72% in the seven years since 2005. Clearly, such an action can only be deemed derisive of the scientific community, not to mention criminal and incomprehensible if one does not know about the hidden agenda behind the fluoridation of water, which is to chemically lower the nation's fertility rate below two children per woman and keep it there until the population stops growing.

The only concession the government did finally make in 2011 was to lower the concentration of fluoride in public water from 1ppm to 0,7ppm. If Hong Kong serves as guidance, this concentration will still affect fertility to the same extent. It was only after Hong Kong lowered the concentration to 0,5ppm in 1988 that the fertility rate decline gradually began to stop and ten years later fertility began to bounce back slightly though remaining still well below replacement level.[14]

The common statements against water fluoridation that are appearing with increased frequency and have a greater number of signatories than ever before are the result of well-founded fear based on bitter experience that scientists who speak against water fluoridation are singled out and have their careers destroyed by the agencies entrusted with keeping the illusion alive long enough to allow the fluoridation policy achieve the nation's secret demographic goals. The vicious attacks perpetrated on honest scientists[15] since the introduction of forced mass medication through the fluoridation of water are well documented and serve as an impenetrable

[12] Coalition of U.S. Environmental Protection Agency Unions: Letter to U.S. Congress on Fluoride Regulation, NTEU Chapter 280, 5 August 2005, http://nteu280.org/Issues/Fluoride/fluroride%20.unions.congress.htm.
[13] Coalition of U.S. Environmental Protection Agency Unions, NTEU Chapter 280, 5 August 2005, http://nteu280.org/Issues/Fluoride/flouride.unions.epa.a.2005.htm.
[14] E.C.M. Lo and A.H.H. Wong, *2440 Water fluoride concentration and fluorosis in Hong Kong in 1960-2001*, University of Hong Kong, http://iadr.confex.com/iadr/2006Brisb/techprogram/abstract_82371.htm.
[15] Suppression of Scientific Dissent on Fluoride's Risks and Benefits, http://www.fluoridealert.org/suppression.htm

political barrier to science in the U.S. and indeed throughout the West[16], which is why research on the subject comes mostly from non-western countries.

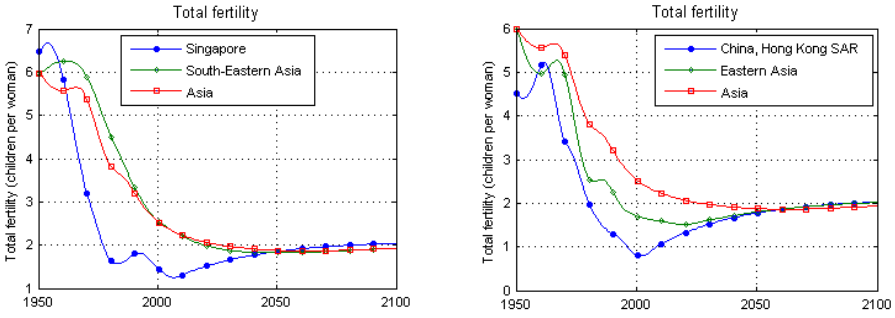
The same obstructionist methods observable in the US at the political level are mirrored at the UN level by the World Health Organization (WHO) whose myopic assessments find no health problems associated with it beyond skeletal fluorosis and bone fractures[17] and who continues to recommend it worldwide. The WHO hides the toxic aspects of water artificially fluoridated and recognizes only select adverse effects of water naturally high in fluoride. Its carefully crafted endorsements and reports[18] show just how scientifically dishonest and politically motivated the WHO is and explains why the institution is universally mistrusted.

The evidence that fluoridated water is an effective sterilizer comes not only from science but also from demographic data, statistics and political indicators.

[16] Voices of Opposition Have Been Suppressed since Early Days of Fluoridation (C&EN), *Chemical & Engineering News*, 1 August 1988, http://www.fluoridealert.org/hileman4.htm.
[17] M. A. Lennon, H. Whelton, D. O'Mullane, J. Ekstrand , *Rolling Revision of the WHO Guidelines for Drinking-Water Quality*, World Health Oganization, September 2004, http://www.who.int/water_sanitation_health/dwq/chemicals/en/nitratesfull.pdf.
[18] J. Fawell, K. Bailey, J. Chilton, E. Dahi, L. Fewtrell and Y. Magara, *Fluoride in Drinking-water*, WHO 2006, http://www.who.int/water_sanitation_health/publications/fluoride_drinking_water_full.pdf. R. Liteplo, R. Gomes, P. Howe and H. Malcolm, *Environmental Health Criteria 227: Fluorides*, WHO 2002, http://whqlibdoc.who.int/ehc/WHO_EHC_227.pdf.

**INDICATOR 1:**

The only two countries in the world to supply fluoridated water to 100% of the population, Singapore and Hong Kong, are also the countries with the lowest ***total fertility rates*** **(TFR = the number of children born to a woman in the course of her lifetime)** in the world. Singapore's TFR stood at 1.16 in 2010 and Hong Kong's at 0.9. Singapore was the first Asian nation to institute water fluoridation in 1956 and Hong Kong followed suit five years later in 1961. Low and behold, once they adopted fluoridation it took both countries exactly 18 years to lower their TFR to replacement level (i.e. 2.1 children per woman) even though they both started from an extremely high TFR of c. 6 children per woman and have different ethnic compositions, political and social structures.



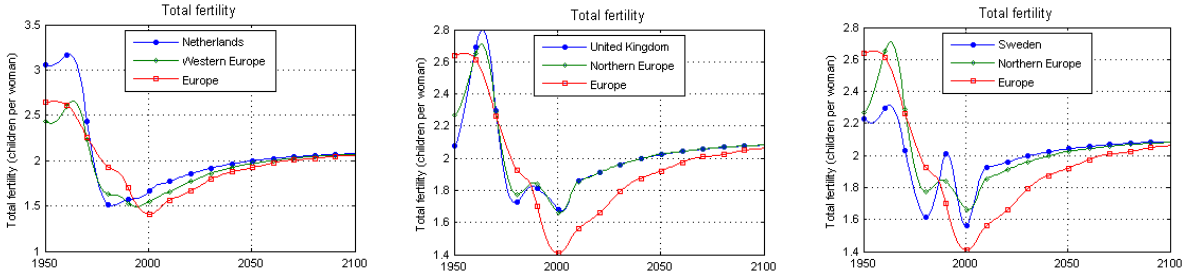

This identical and rapid decline in fertility can only be explained by one and one factor only, the fluoridation of their public water, as this is the only common denominator the two nations have shared over this period of drastic and identical demographic transition. The above graphs show clearly that fluoridation started in Singapore in 1956 and in Hong Kong in 1961.

It is important to note that Hong Kong and Singapore were both British colonies when water fluoridation was imposed on them by their British administrators, but while Honk Kong's water fluoridation policy was dictated by demographic considerations only, Singapore's was dictated primarily by political considerations. The British controlled more than just the political destinies of their colonial subjects in Hong Kong and Singapore; they controlled their reproductive systems too.

Singapore's political motivations are discussed further down the text, but Hong Kong's were purely demographic in nature. The Nationalist-Communist Civil War in China prompted a large influx of refugees in the 1950s from the mainland, causing a huge population surge and making it difficult for the government of Hong Kong to accommodate these new immigrants. Due to lack of border controls from 1949, when the People's Republic of China was established, and until June 1951, when law and order reached the border service, as many as 100,000 refugees flooded into Hong Kong every month from China, swelling its population to a staggering 2.2 million and making it one of the most densely populated places in the world. Faced with an onslaught of refugees and an upcoming baby boom due to the fact that half of the population in

1960 was under the age of 25, the British took immediate action and instituted universal water fluoridation. As a result, the baby boom never happened and the graph above clearly shows this.

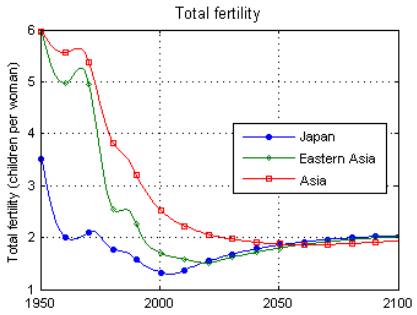
The same picture emerges in Europe when one juxtaposes the time when water fluoridation was introduced in each country with the year when fertility rates began to drop. The Western European countries of Sweden, Netherlands and the UK began water fluoridation at around the same time in 1960 and all reached replacement level TFR some fifteen years later around 1975, even though the Netherlands started with a much higher fertility rate of above 3 and these countries have very different social systems and family structures.




The graphs above clearly illustrate that all three countries experienced a much steeper descent in TFR than the rest of Northern Europe and even more so than the rest of Europe, all reached below replacement level TFRs at the same time and sooner than the rest of Northern Europe and Europe as a whole, and that as soon as water fluoridation was abandoned around 1975 their fertility profiles took different paths.

## INDICATOR 2

The United States imposed water fluoridation on Japan at the end of World War II, undoubtedly as a condition of surrender. Japan, being the first Asian country to have water fluoridation, was also the first to reach replacement level fertility in 1960 and chronically low fertility since the 1980s, as a consequence of which it is the first Asian country to have to deal with an ageing population and with the economic downfall of this demographic development. Its TFR graph shows clearly how widely Japan's fertility diverges from Eastern Asia, with whom it shares many cultural affinities and whom in the absence of water fluoridation it would have closely resembled.



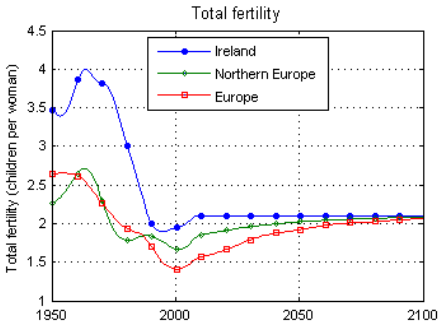

That Japan is the first country in the world and not just in Asia to reach below replacement level fertility – and to do so 15 years earlier than the first European countries and despite starting with a much higher total fertility rate of 3.5 – is of course no fluke of history, but the result of the retaliatory punishment the U.S. felt compelled to subject its enemy of war; punishment that took the form of the most intense water fluoridation campaign the world has ever known. This is of course a well-kept secret and very few references exist[19]; the reason being that when the U.S. imposed water fluoridation on the Japanese right after the war it could not have been out of concern for the dental health of Japanese children since the use of fluoride in Japan's drinking water predates any claims about its usefulness in combating tooth decay.

The dishonest research in regards to fluoride and dental health did not start coming out until the early 1950s. Most tellingly, it was a Swiss gynecologist by the name of Wespi and not a dentist who inferred that the addition of fluoride to salt would reduce the prevalence of dental caries.[20]

[19] Joel M. Kauffman, Water Fluoridation: a Review of Recent Research and Actions, Journal of American Physicians and Surgeons, Vol. 10, No. 2, Summer 2005.
[20] Wespi H. J., Fluoridiertes Kochsaltz zur Cariesprophylaxe, *Schweizer Monatsschrift fur Zahnmedizin* 80: pp.561-564 (1950).

## INDICATOR 3

Every country in the world – irrespective of culture, ethnicity, religion and economic development – that has introduced water fluoridation to a substantial percentage of the population and in the absence of family planning programs began experiencing rapid declines in their fertility levels within a year or two.




**Czechoslovakia** started water fluoridation in 1958 but it was not widespread until 1975. By 1982, thus in less than ten years and in the absence of any family planning measures, the country achieved below replacement level TFR.

**Ireland**, the only European country that currently uses water fluoridation extensively, started later than anyone else in 1964 when Irish women had four children on average, the highest TFR in Europe. By 1990, fluoridation coverage reached 50% of the populace and its TFR had dropped to 1.9, thus below replacement level, which is a remarkable achievement for a Catholic country where very large families were the norm and abortion is and always was considered a sacrilege not to mention being punishable by law. As the adjacent graph shows, the time when water fluoridation began, namely 1964, is the time when Ireland's TFR began its rapid decline. The peculiar curve at the top of the also reflects the advance of water fluoridation which began in Dublin in 1964 but did not spread to other urban centres until 1973.

A most telling example is also provided by the former German Democratic Republic, which started fluoridation in 1959, thus ten years after it separated from West Germany, and continued until reunification with West Germany in 1990. West Germany, unlike East Germany, did not fluoridate its water (though it used fluoridated salt from the late 1980s onward). As a result, East Germany had a birth rate of 0.4 children per 1000 people, and its population stayed flat (once emigration is factored in), while West Germany had a birth rate of 3 per 1000 and its population grew by more than 10%, (once we factor out the waves of immigration). This wide divergence in only forty years between the demographic curves of East and West Germany, which are one and the same people, can only be fully explained by the fluoridation factor.

## INDICATOR 4

Today, only countries with a population problem and the political will to address their dangerous demographic curves use extensive water fluoridation programs: Brazil (80% coverage), Chile (71%), Colombia (70%), Israel (70%), and Malaysia (75%).

**Brazil**, a country of 193 million inhabitants, started to fluoridate its water in 1953 but did not make it mandatory until it became federal law in 1974.[21] Three years later, the Ministry of Health set the drinking water fluoridation standard to 1.7 mg/L, much higher than the optimal level recommended by the WHO for warm countries.[22] In 1988 fluoride was also added to toothpaste and within a year more than 90% of the products available to consumers were fluoridated.[23] By 2004, fluoridated water had reached 71% of the population and as of 2012 the figure stands at 80%. Brazil's total fertility rate dropped from 6 in the 1950s to 3.3 in 1986, then to 2.44 in 1994 and to 1.9 in 2010, well below replacement level.

Demographers marveled at Brazil's achievement:

> *"Fertility declined in urban and rural areas, in all regions, and among all socioeconomic strata, although the rates continued to vary. In large countries, such a rapid and generalized fertility decline had been observed previously only in China, where official policy placed intense pressure on couples to have only one child."*[24]

The mystery reason why the Brazilian birthrate began to decline noticeably in the 1970s in a country that is known for its sexual prowess is the government's aggressive water fluoridation program. Today, Brazil's TFR stands at 1.8, which is an impossibly low level given the large percentage of young Brazilians and the country's liberal sexual habits. Absent water fluoridation, Brazil's natural fertility rate would have been substantially higher.

Brazil's government, however, is not satisfied and is staying the course. Even though the temperatures in Brazilian state capitals indicate that fluoride levels should be between 0.6 and 0.9 mg/l for "teeth to be healthy", and a 2011 review has recommended lowering it from the current 1.5 mg/l level that was set by ordinance in 2000,[25] the Ministry of Health has not lowered the concentration. The government is aware that the high fluoride concentration it is currently using is more effective for stunting fertility than a lower concentration would be. It is also equally aware that the occurrence of caries does not diminish at higher fluoride concentrations,

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[21] Brasil. Lei Federal nº 6.050, de 24/05/1974. In: Coleção das Leis de 1974: Atos do Poder Legislativo: leis de abril a junho. Brasília, DF: Departamento de Imprensa Nacional; 1974. v.3, p.107.

[22] Ministério da Saúde. Portaria nº 56/Bsb, de 14 de março de 1977. Aprova normas e o padrão de potabilidade da água a serem observados em todo o território nacional. *Diario Oficial Uniao.* 22 mar. 1977.

[23] Cury J.A., Tabchoury C.P.M., Determination of appropriate exposure to fluoride in non-EME countries in the future. *J Appl Oral Sci*. 2003; 11(2):83-95, http://www.ncbi.nlm.nih.gov/pubmed/21409319.

[24] *Country Study, Fertility in Brazil*, http://countrystudies.us/brazil/28.htm.

[25] Paulo Frazão, Marco A. Perez and Jaime A. Cury, Drinking Water Quality and fluoride concentration, *Rev Saúde Pública* 2011;45(5), http://www.ncbi.nlm.nih.gov/pubmed/21789449.

while the prevalence of dental fluorosis increases significantly[26], but this is a risk Brazil's leadership is more than willing to subject its citizens to in pursuit of low fertility.

**Chile** first started fluoridating potable water in 1986 in the city of San Felipe and by 2008 it reached 71% of the country. Whereas women of childbearing age (fourteen to forty-nine years) had an average of 5.4 children in 1967, by 1986 this average had dropped to 2.7. Chile, however, still faced a population explosion once the 49% of Chileans who were estimated to be less than twenty-four years of age in 1992 would begin to procreate. The government decided to be proactive and use water fluoridation to chemically lower the fertility of the new generations before they become adults and start families of their own. The strategy worked and by 2010 its TFR dropped to 1.9, safely below replacement level.

The sterilizing effect of fluoridated water on the new generations was enhanced by the National Complementary Feeding Program (PNAC), which delivers free powdered milk and milk derivatives to all children from birth to 6 years old and has nation-wide coverage.[27] These powdered products are prepared with tap water before ingestion and have undoubtedly contributed greatly to high levels of fluoride and therefore sterility before these children reach adulthood. The planners of the sterilization program take advantage of local customs:

> *"The use of powdered milk in Chile is an old and lasting dietary habit. Results obtained in this study regarding the high percentage (95.5%) of powdered milk use until school age are similar to those of a recent epidemiological study (28), which showed that more than 90% of Chilean children up to 6 years old use powdered milk and milk derivatives. Thus, tap water consumption either directly or indirectly through the preparation of powdered milk and milk derivatives and other beverages such as tea, soups and water-diluted powdered juices, constitutes nearly all of the fluid consumption of infants after breast-feeding cessation and extends through their first years of life. Results from this study suggest that under Chilean conditions the prevalence of CMI fluorosis may be associated to the ingestion of water with a fluoride concentration of 0.9 mg/L during the first 2 years of life."*[28]

According to official declarations, the government of Chile began fluoridating the powder milk distributed freely through its National Complementary Feeding Program in the 1980s and to date the program has nation-wide coverage. Judging by the steep decline in TFR starting after President Salvador Allende was assassinated in 1973 and the military dictatorship of Augusto Pinochet took over the reins of the country, it is safe to assume that milk fluoridation began at that time. Until Pinochet came to power, Chile's TFR was consistently above 4.5, but within five years of his leadership it dropped to 3.6 and by the time he left office in 1990 it had dropped even further to 2.6. It appears that Pinochet murdered more than students and activists, he also murdered the nation's reproductive vigor. With or without Pinochet, however, Chile has

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[26] Burt BA, Eklund SA. *Dentistry, dental practice and the community*. 5. ed. Philadelphia: WB Saunders; 1999.

[27] Alberto E. Villa, Sonia Guerrero, Gloria Icaza, Jaime Villalobos & Mireya Anabalon, Dental Fluorosis in Chilean children: evaluation of risk factors, *Community Dental Oral Epidemiology* ,1998; 26:301-15, http://radiologia.cl/revminsal/estudios/incluidos/Villa%20(1998)%20Dental%20fluorosis%20in%20chilean%20children%20evaluation%20of%20risk%20factors.%20Community%20Dent%20Oral%20Epidemiol.%2026%3B%205%20pp.%20310-315..pdf

[28] Ibid., p. 5.

continued with its depopulation campaign through the fluoridation of water in the cities and milk in the countryside and to date its TFR is safely below replacement level at 1.9 and its annual population growth rate of 0.89% is the third lowest in Latin America after Uruguay and Cuba, both of which have their own fluoridation programs, Uruguay using both water and salt while Cuba uses 100% fluoridated salt.[29]

**Colombia**'s population was around 4 million in 1900. By 1950 it had tripled and by the end of the 20th century it had tripled again. To date, Colombia has over 44 million souls; that is a tenfold increase in only a century. Population growth peaked at 3.4% in the 1950s, remained at high levels until the early 1970s, and then slowed and stabilized at 2% by the 1980s. Until the mid-1960s, Columbian women had an average of seven children, ensuring a steady annual population growth rate of 3%, one of the highest in the world.

Water fluoridation started in 1963 in the Ciudad de Girardot and was quickly extended to the large cities of Cali, Bogota, Medellin and Manizales. By 1969 the Colombian government drafted its water fluoridation strategy.[30] As soon as water fluoridation was broadly used by the mid-1960s, fertility began declining sharply from seven to about four children per woman by the mid-1970s. The corresponding drop in the birth rate over the same period was among the most dramatic declines experienced in any country, leaving demographers puzzled at how this could have been achieved when "*family planning programs did not initiate the fertility decline because such programs did not begin until after the onset of the rapid fertility decline*". They marveled at the miracle:

> *"The Colombian experience is remarkable in the abruptness and magnitude of the declines in mortality and fertility, particularly given the absence of radical changes in the social, political, or economic order. Similar declines have taken place in Cuba and the Democratic People's Republic of Korea (North Korea), but only under conditions of drastic regime change."*[31]

Western agencies however were not entirely satisfied:

> *"Despite the dramatic fertility decline, the World Bank emphasized that a considerable gap remained in the 1980s between existing fertility levels and those prevailing in modern industrial societies. Thus, the demographic transition in Colombia was far from complete. The experience of more industrialized countries suggested that eventually fertility would decline to the two children level. Whether this occurred quickly (by 2000) or slowly (by 2020) would greatly affect the*

[29] While Pinochet implemented the fluoridation plan he was not its architect. The pivotal political figure who committed Chile to the global depopulation agenda was Eduardo Frey Montalva, the President of Chile from 1964 to 1970. This is suggested by Montalva's participation in the Brandt Commission, which was intimately involved in the population problem, and by his 1981 invitation to the Club of Rome. Montalva also put in place the National Complementary Feeding Program in the 1960s, in preparation of the free distribution of fluoridated milk powder. The viciousness of Montalva's attack on Allende and Allende's subsequent assassination may well have been motivated by the complicity of the country's political establishment in their people's genocide and triggered by Allende's decision to stop the program.

[30] P. 7, Maria Montaña Salas, *Guia de Fluorisis Dental Normas Técnicas de la Fluorosis Dental*, December 2008, http://huila.gov.co/documentos/G/guia_fluorosis_dental_huila.pdf.

[31] *Country Study, Population and Urbanization (Colombia)*, http://www.country-studies.com/colombia/population-and-urbanization.html.

*eventual size of the country's population, the expansion rate of the labor force in the 1990s and beyond, and thus the social overhead investment and fiscal burden that the society would have to underwrite."*[32]

To comply with loan conditions set by the World Bank in respect to population control, the Colombian government doubled its efforts and in addition to water fluoridation added salt fluoridation in 1989. As a result of the double source ingestion of fluoride, 25% of Colombian children 6 to 7 years old suffer from dental fluorosis.[33] The target of replacement rate fertility, however, has been nearly reached. As of 2010 it stands at 2.4. How many Columbians are infertile as a result of the aggressive fluoridation they have been subjected to a subject the government of Chile or the UN agencies are not talking about.

**Israel** introduced water fluoridation in 1981, but a national effort to fluoridate all public water was not approved until 1988 and to date the coverage has purportedly reached 70% of the country. With a population of 7.5 million (excluding the Occupied Territories) and a monumental fight for land expropriated by force from the native Palestinians, Israel had to sooner or later face the country's resource limits and start addressing its steeply growing population. They could not allow themselves to do so, however, until the Arab TFR was brought in line with the Jewish TFR.

Israel saw the need to address the Arab demographic threat from the very beginning of its existence as a state. In 1950, Arabs in Israel made up 9% of the population but by 2000 they had gained ground on the Jewish population and came to account for 17% of the total. Once the 3.9 million Palestinians living in the Occupied Territories are factored in, the population of Israel is evenly divided between Jews and Arabs, making the one state solution unattractive for the Israeli leadership.

Statistics indicate that the Israeli government used water fluoridation selectively by targeting the minority Muslim population living within Israel so as to lower their fertility rate artificially while raising the Jewish fertility rate through pro-natalist policies in the hope that ultimately the two would converge at a similar rate of growth and Israelis would not have to face the prospect of becoming outnumbered. The strategy has worked and by 2010 the percentage of Arabs in Israel was stabilized at 20%. Wikipedia lists the following statistics:

*Jewish TFR increased by 10.2% during 1998–2009, and was recorded at 2.90 during 2009. During the same time period, Arab TFR decreased by 20.5%. Muslim TFR was measured at 3.73 for 2009. During 2000, the Arab TFR in Jerusalem (4.43) was higher than that of the Jews residing there (3.79). But as of 2009, Jewish TFR in Jerusalem was measured higher than the Arab TFR (2010:*

[32] *Country Study, Population and Urbanization (Colombia)*, http://www.country-studies.com/colombia/population-and-urbanization.html.
[33] p. 8, Maria Montaña Salas, *Guia de Fluorisis Dental Normas Técnicas de la Fluorosis Dental*, December 2008, http://huila.gov.co/documentos/G/guia_fluorosis_dental_huila.pdf.

*4.26 vs 3.85, 2009: 4.16 vs 3.87). TFR for Arab residents in the West Bank was measured at 3.05 in 2010, while that for the Jewish residents was reported at 5.10 children per woman.*[34]

The strategy is currently being expanded to the Occupied Territories. To be able to secretly or openly fluoridate the water of the Gaza Strip and the West Bank, the Israeli government had to first gain control of all water sources formerly under Palestinian jurisdiction. The goal was accomplished[35] and the fluoridation program appears to have started, judging by fluoride tests that have measured well above 2.00 ppm in both territories, levels high enough to sterilize salmon within days[36] and certainly strong enough to seriously dent the virility of the Arab population.

There are currently 3.9 million Palestinians in the Occupied Territories and due to fertility rates at more than 4.5 children per woman they have one of the fastest growing populations in the world. If Israel has started fluoridating their water, the Palestinian TFR will drop like a plane from the sky within a decade.

The evidence suggests that the process has started, as studies already show an escalating level of fluoride in the drinking water of Gaza. A study done in 2004 monitored 73 groundwater wells to determine the fluoride levels in the Gaza Strip and the prevalence of dental fluorosis among school children. It found fluoride contents to be well above the WHO standard of 1 mg/l and dental fluorosis in 60% of the children.[37] The team retested the wells again in 2006 and found that concentrations of chloride, nitrate and fluoride exceeded 2-9 times the WHO standards in 90% of the wells with maximum concentrations of 3,000, 450 and 1.6 mg/l, respectively.[38] A follow-up study done by the same team in 2007 found chloride and nitrate levels unchanged but fluoride levels to be much higher, reaching concentrations as high as 4.6 mg/l, placing the wells far below the WHO standards and much higher than the previous years.[39]

Since the siege of Gaza began in 2007 the water situation has become even worse and in 2010 a warning was issued by the UN Environment Programme, the Palestinian Water Authority and international aid organizations that almost 95% of the water pumped into Gaza is polluted and unfit for drinking. In 2008, Sarah Flounders of the International Action Centre reported that *"conditions in Gaza are desperate…water filters, water pumps and bottled water are barred"*.[40]

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[34] Demographics of Israel, Wikipedia article, http://en.wikipedia.org/wiki/Demographics_of_Israel

[35] Israel's control of water supply leaves Palestinians thirsty, Cornerstone, Issue 61, Winter 2011, http://www.sabeel.org/datadir/en-events/ev240/files/Corner61lowraise.pdf.

[36] Ted Spence, The Fluoride Controversy, 2, January 2008, http://articles.mercola.com/sites/articles/archive/2008/01/02/fluoride-controversy.aspx

[37] Shomar B., Yahya A., Müller G., Askar S., Sansur R. 2004. Fluorides in groundwater, soil and infused-black tea and the occurrence of dental fluorosis among school children of the Gaza Strip, *International Journal of Water and Health*, **2**, 23-36. http://www.shomar.uni-hd.de/pdf-publications/fluoride.pdf.

[38] Shomar B. 2006. Groundwater of the Gaza Strip: is it drinkable? *Environmental Geology*, **50**, 743-751.http://www.shomar.uni-hd.de/pdf-publications/Groundwaterstudy.pdf.

[39] Shomar B. 2007. Water and Wastewater in the Gaza Strip: Environmentally as Hot as Politically. *Zeitschrift für Geologische Wissenschaften*, **35**, 165-176. http://www.shomar.uni-hd.de/pdf-publications/Hot%20topics.pdf.

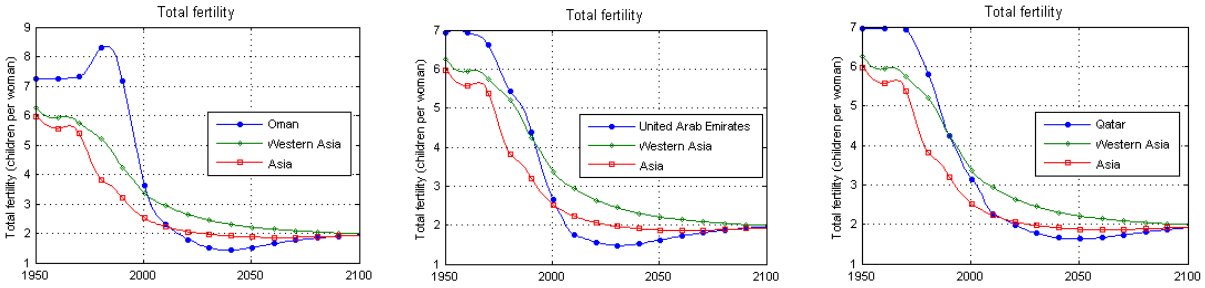
[40] Thomas L. Are, *Seven Years Later it's Even Worse*, 24 June 2012, http://thomoas-l-are.blogspot.com/.

To make sure Palestinians drink polluted water, Israel to this day forbids the entry of equipment and materials needed to rehabilitate the water and wastewater treatment systems.[41]

**Malaysia** had a population of 6 million in 1960, but by 2012 it had grown fivefold to nearly 30 million. It began to fluoridate its water in 1972 when its TFR stood at 4.5. By 1987, some 65% of its public waterworks were fluoridated and its TFR had dropped to 3.5. By 2011, the fluoridation coverage was extended to 76% of the population and its TFR dropped further still to 2.5. While this is a great achievement, the Malaysian population continues to grow at a rate of 2.4% per annum, which is why fluoridation is likely to continue for at least two more decades.

Seven other nations fluoridate water but so far to statistically less significant degrees: Vietnam (6%), Argentina (9%), Guatemala (16%), South Korea (12%), the Philippines (7%), the UK (10%), and Spain (10%). South Africa and Brunei also fluoridate but to an unknown extent. Recent figures put Brunei's water fluoridation coverage at 54%. Chances are many other nations, especially in the Middle East (where the issue is politically untouchable) do it on the sly. Judging by the sudden drops in fertility in several Arab countries it is safe to assume that depopulation by water fluoridation is already unfolding.

The above graphs below that Oman began water fluoridation in 1982, Qatar in 1970 and the United Arab Emirates in 1968. Their current method of delivering fluoride into their citizens' bodies, however, is through bottled not tap water. The scarcity of water in the region prevents these countries from dumping toxic substances in the little water they do have. Furthermore, if caught the precariously unstable and unpopular monarchies that rule the countries of the Arabian Peninsula have the option of blaming the exporting countries for the presence of fluoride in their water bottles. The delivery of fluoride through bottled water is discussed further down the text.




It should also be noted at this time that the countries of the Arabian Peninsula are increasingly relying on desalinated water for their drinking needs. While fluoride levels in surface water vary from 0.01 to 0.03 mg/liter, in seawater the concentrations range from 1.2 to 1.5 mg/liter[42], thus far higher than those advised by the WHO for warm climates. It is my contention that fertility

[41] 24 August 2010, http://map-uk.org/regions/opt/news/view/-/id/837/.
[42] Liteplo L. & Gomez R., *Environmental Health Criteria 227, Fluorides*, World Health Organization, Geneva 2002, http://whqlibdoc.who.int/ehc/WHO_EHC_227.pdf.

rates throughout the Arabian Peninsula began moving downward as the proportion of drinking water derived from desalination began moving upward. Unfortunately, I do not have the data necessary to confirm this.

## INDICATOR 5

High immigration industrialized countries use water fluoridation to bring the incoming immigrants in line with the native population in terms of fertility levels, which is why they alone in the West maintain and even expand their water fluoridation programs. Australia has extended water fluoridation to 90% of its people, Canada to 45%, New Zealand to 61% and the USA to 75%. Demographic analyses of the U.S. and Australia, and to a lesser extent of Canada and New Zealand, reveal large gaps between the fertility rates of the white native population, which are well below replacement level, and those of the incoming immigrants of Hispanic and Asian origin, which are well above replacement level. Until there is convergence, these high immigration countries will continue to fluoridate their public water as that is the only way to create a level playing field in terms of family size between incomers and natives while also staying on track with their demographic goals.

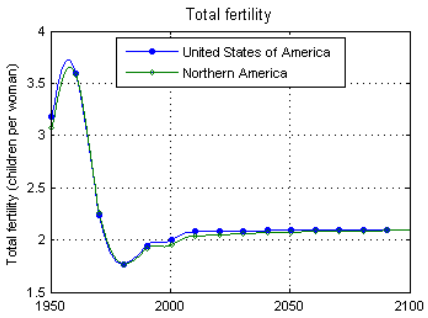
In the U.S., 12.5% of the people are foreign-born, in Canada 20% and in Australia 22% and invariably these new citizens have higher reproductive rates than the general population. The table below shows that Hispanics in the US will more than double in number by 2050, Asians will triple and whites will stay the same, which will change the racial face of the nation. For instance, while Hispanics now account for only a sixth of the population, by 2050 they will represent a quarter.

**Table 1:** Projected Population of the United States, by Race and Hispanic Origin: 2000 to 2050

| | 2000 | 2010 | 2020 | 2030 | 2040 | 2050 |
|---|---|---|---|---|---|---|
| TOTAL | 282,125 | 308,936 | 335,805 | 363,584 | 391,946 | 419,854 |
| White alone | 228,548 | 244,995 | 260,629 | 275,731 | 289,690 | 302,626 |
| Black alone | 35,818 | 40,454 | 45,365 | 50,442 | 55,876 | 61,361 |
| Asian Alone | 10,684 | 14,241 | 17,988 | 22,580 | 27,992 | 33,430 |
| All other races (a) | 7,075 | 9,246 | 11,822 | 14,831 | 18,388 | 22,437 |
| Hispanics (of any race) | 35,622 | 47,756 | 59,756 | 73,055 | 87,585 | 102,560 |
| White alone (not Hispanic) | 195,729 | 201,112 | 205,936 | 209,176 | 210,331 | 210,283 |

*Notes:* (*a*) Includes American Indian and Alaska Native alone, Native Hawaiian and Other Pacific Islander alone, and Two or More Races. *Source:* U.S. Census Bureau, 2004, "U.S. Interim Projections by Age, Sex, Race, and Hispanic Origin," http://www.census.gov/ipc/www/usinterimproj/ , Internet Release Date: March 18, 2004

Above and beyond the racial dimension, the populations of these high immigration countries will continue to swell in numbers by virtue of natural growth and immigration until 2020 or 2030 depending on forecasts.

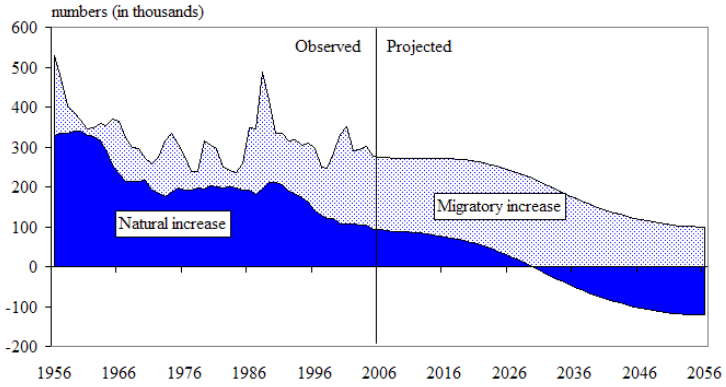



Canada has harmonized its population control agenda so closely to that of the United States by employing the same methods and materials to fluoridate the people's water and lower their fertility that its historic development in total fertility rates is nearly identical to that of its southern neighbor, despite marked differences in ethnic composition and immigration patterns, as the adjacent graph shows. This could not have occurred by accident and can only be attributed to careful planning and deliberate execution.

**Canada**'s demographics and not the dental health of its citizens is the government's true justification for continuing the water fluoridation policy. Since 1960, its population has doubled reaching 34 million in 2011 and its 1% annual population growth, though modest when compared with the developing world, is the highest among G8 countries. With 250,000 new immigrants entering the country every year since 1990 and now accounting for 20% of the population Canada has the largest net international migration as a proportion of population growth.

Until the 1990s, natural growth was the main engine of Canada's total population growth but by 2006 a reversal had occurred and international migration accounted for two-thirds of its population growth while only one third was due to natural growth. 60% of the newcomers are from Asia and they have a much higher fertility rate than the rest of Canada.

**Migratory and natural increase of the Canadian population, 1956 to 2056**




**Data sources:** Statistics Canada, 2005, *Population Projections for Canada, Provinces and Territories, 2005-2031,*Statistics Canada Catalogue number 91-520-XIE, scenario 3, and Demography Division, annual population estimates from 1956 to 2005.

All Canada's visible minority groups are in fact projected to double in size over the next two decades as a result of their higher fertility rates. Irrespective of who procreates more, natives or immigrants, Canada's population is expected to experience natural growth until 2020 if the total

fertility rate of Canadian women can be kept at the current level of 1.5 children per woman. If, however, it is allowed to slip up to 1.7 then the stabilization of the population will be postponed until 2035 and this explains why Canada continues to poison/medicate its citizens with fluoridated water.[43]

To ensure that Canada's fertility rate does not go up due to the greater virility of its foreign born newcomers and the refusal of provinces that have so far adamantly resisted widespread water fluoridation, the Canadian government is applying pressure on the Province of Quebec, the second most populous province, to start fluoridating its water.[44] The government is alarmed by an upward trend in Quebec, whose population growth has increased from 4.3% between 2001 and 2006 to 4.7% between 2006 and 2011, while Ontario's population, which is the most fluoridated in the country, has seen its growth decline slightly over the same period.[45]

The true rate of divergence in population growth between the two provinces is in fact greater than the government's tampered statistics will lead one to believe and is best exemplified by Ontario's need to close 300 schools due to lack of children while Quebec has not had to close a single school.[46]

It is worth mentioning that the Quebec authorities are mandating water fluoridation, which is a costly endeavor, at a time of austerity when social programs and education budgets are being cut fiercely and student tuition fees are to double over the next five years. The latter action has sparked the country's longest running student protests. The government has no money to educate Quebec's youth but plenty of money to make them infertile in the prime of their lives. Its irreconcilable priorities between cutting spending for social programs to stay within the budget, on the one hand, and increasing spending to introduce water fluoridation, which will inevitably force it to break its budget, on the other hand, can only be explained by the hidden purpose of fluoridation and not by its presumed dental hygiene function. It is the hidden purpose of water fluoridation and not its stated one that make it far more important to the government than social programs, education and even political advantage. Were that not the case the government would have been more than happy to scrap its fluoridation campaign and save itself some much needed cash. The people would have cheered them on and the Liberals now in charge of the province would have scored political points. Instead, the federal and provincial

[43] *Canadian Demographics at a Glance*, Statistics Canada, Catalogue no. 91-003-X, 2008, http://www.statcan.gc.ca/pub/91-003-x/91-003-x2007001-eng.pdf.

[44] *Opinion on a Project to Fluoridate Drinking Water*, Comité d'éthique de santé publique, March 2012, http://www.inspq.qc.ca/pdf/publications/1422_AvisProjetFluorationEauPotable_VA.pdf

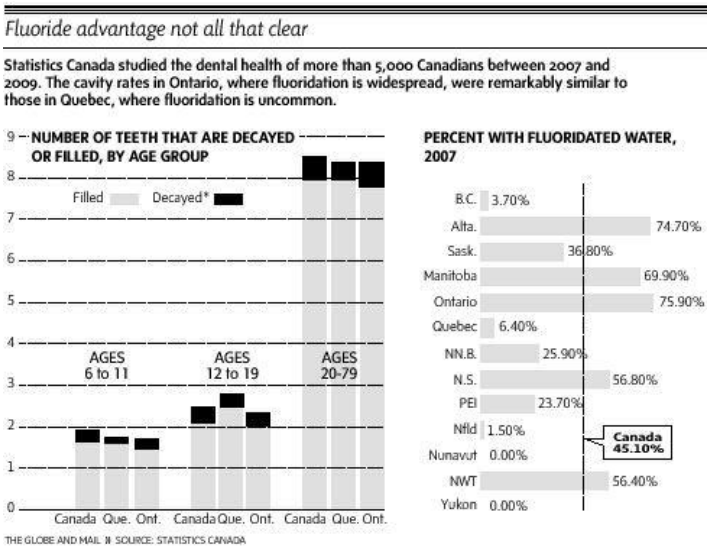
[45] Statistics Canada, Census 2011, http://www12.statcan.gc.ca/census-recensement/2011/as-sa/98-310-x/98-310-x2011001-eng.cfm.

[46] Hilary White, 300 Schools to Close in Ontario because of Birth Rate Crash, LifeSiteNews.com, http://www.lifesitenews.com/news/archive/ldn/2008/apr/08042404

governments are bending over backwards to push ahead with a measure they know is politically untenable.

Quebecers have fought hard to maintain their Francophone culture and avoid being swallowed by the Anglophone world around them both in terms of numbers and language. They have so far rejected widespread water fluoridation and this has allowed them to maintain their proportion of the population at around 25% of Canada as a whole despite the fact that more than 80% of new immigrants to Canada settle in the Anglophone part and less than 20% come to Quebec. This puts the province at a demographic disadvantage that over the years has seen its cut of the population pie shrink from 29% in 1951 to 22% in 2006. Ottawa however is not concerned about the nationalist sentiments of Quebecers as much as with the long-term goal of stabilizing the population and to accomplish this it needs to extend water fluoridation to Quebec.

Currently, only 3% of the province is fluoridated compared with 7% in 2006 and 12% in 1993. To ensure that Quebec's population stops growing at the same time as the rest of Canada the government is attempting to force its secret population control weapon, water fluoridation, on the people of Quebec who want no part of it. As in the US and elsewhere public officials are fudging the numbers and falsifying science to be able to push water fluoridation under the pretext of improving people's oral health equitably by providing each and all with equal access to fluoridated drinking water. Against all evidence, its latest report asserts that *"children in Québec have 40% more cavities than those in Ontario and the United States",* which is patently false as the graph below and several other studies show.[47]


Fluoride advantage not all that clear
Statistics Canada studied the dental health of more than 5,000 Canadians between 2007 and 2009. The cavity rates in Ontario, where fluoridation is widespread, were remarkably similar to those in Quebec, where fluoridation is uncommon.
NUMBER OF TEETH THAT ARE DECAYED OR FILLED, BY AGE GROUP
Filled
Decayed*
AGES 6 to 11
AGES 12 to 19
AGES 20-79
Canada Que. Ont. Canada Que. Ont. Canada Que. Ont.
PERCENT WITH FLUORIDATED WATER, 2007
B.C. 3.70%
Alta. 74.70%
Sask. 36.80%
Manitoba 69.90%
Ontario 75.90%
Quebec 6.40%
NN.B. 25.90%
N.S. 56.80%
PEI 23.70%
Nfld 1.50%
Nunavut 0.00%
NWT 56.40%
Yukon 0.00%
Canada 45.10%
THE GLOBE AND MAIL ■ SOURCE: STATISTICS CANADA

[47] Marian McDonagh, Penny Whiting, Matthew Bradley, Janet Cooper, Alex Sutton, Ivor Chestnutt, Kate Misso, Paul Wilson, Elizabeth Treasure & Jos Kleijnen, *A Systematic Review of Public Water Fluoridation,* September 2000, http://www.yprk.ac.uk/inst/crd/CRD_Reports/crdreport18.pdf. See also Paul Connett, James Beck & Spedding Micklem, *The Case Against Fluoride*, Chelsea Green Publishing, 2010.

In the absence of convincing science and in the face of fierce public opposition, the government is resorting to force and has given itself permission to:

> "*…make the fluoridation of drinking water **mandatory** through regulation, using a phased approach:*
> *• Short term: fluoridation of drinking water in Québec's 10 largest cities (population of 100,000 or more), reaching 47% of the total population;*
> *• Medium term: fluoridation of drinking water in the 10 next largest cities (populations of 50,000 or more), reaching 56% of the total population;*
> *• Long term: fluoridation of drinking water in towns with a population of 5,000 or more, reaching 75% of the total population."* (p.13)

With characteristic hypocrisy and criminal dishonesty the government's panel of "professionals" frames the reluctance of the public and local authorities to implement fluoridation as an ethical problem since *"fluoridation is the most convenient and least expensive way to reach high-risk groups (and the entire population) to reduce social inequalities in terms of oral and general health".* To solve this self-made problem it asks its experts for hire two questions:

> *"Faced with the reluctance of most Québec municipalities to adopt water fluoridation, a population-based public health measure that is recognized around the world and strongly supported by the Ministère de la Santé et des Services sociaux (MSSS), **is the government of Québec morally entitled to compel cities to fluoridate their water through legislation**?*
>
> *Also, if they refuse to fluoridate drinking water despite the favourable opinions of public health authorities, are these cities harming the health of their citizens, and are they morally responsible?"*(p.17)

It also gives notice that once implemented the policy of medicating the masses with fluoridated water will be irreversible, a notion utterly alien to medicine:

> *"It should also be stated that the artificial fluoridation of drinking water is generally considered to be an irreversible measure, and this is the assumption we have made to this point."* (p.18)

For those smart enough to know better than drink fluoridated water, they suggest buying water filters and abandoning the ignorant to the government's mass sterilization program:

> *Activated alumina defluoridation filters can be purchased at a relatively low cost. Indeed, such filters are regularly used to defluoridate water in which natural fluoride levels are too high. It is therefore relatively easy for people who do not wish to drink fluoridated water to filter it. (pp. 18-19)*

As expected, the panel delivers the scripted answer the government needs to give itself permission to railroad democracy and the public will so as to start mass medicating the populace and achieve the desired demographic outcomes:

> *"In summary, beneficence and equity emerge as the most important and influential values when responding to the question under consideration. They are mutually reinforcing, since beneficence includes concern for the dental health of people from lower socioeconomic backgrounds. These values can therefore be adduced to justify fluoridation."*[48] (p19)

And that is how a few bureaucrats and politicians impose their will on the masses and proceed with a program of mass medication that will cause heartbreak and tragedy to millions of Canadians who will see their children die or have their limbs amputated to fight osteosarcoma, who will ache for their children's retarded intellects, neurological disorders, learning impairments, behavioral problems, and who will most likely never get to see their grandchildren for they will never be born.

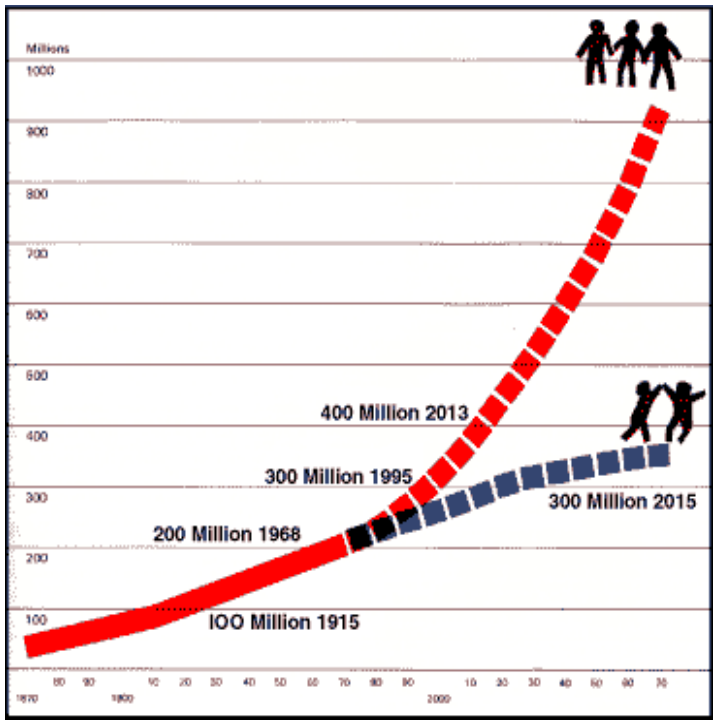
Quebec's panel of government "experts", like countless other government panels before them across the world, have in cold blood signed the death warrant of thousands of children and have with the stroke of a pen started a process that will lead to the deliberate extinction of countless genetic lines that have survived the process of natural selection but that will not survive man's process of political selection.

The project to fluoridate the water of all cities in Quebec with a population over 5,000 is part of *"a national strategy promoting the fluoridation of drinking water".*[49] One must ask why is the federal government encroaching on the jurisdiction of the provincial government on the issue of water fluoridation when it is the responsibility of provinces to provide health care for the people? One must also ask why is the Liberal government in Quebec in tune with the Conservative government in Ottawa on the issue of water fluoridation when this issue antagonizes and angers the populace and should in fact bitterly divide the two parties? This means that water fluoridation crosses party lines and is not a matter of provincial jurisdiction like the rest of health care or of federal jurisdiction, but of international jurisdiction. Why? The answer lies in the hidden purpose of water fluoridation as a covert weapon for mass sterilization employed by an international program of global depopulation.

The American demographic situation is even more difficult than Canada's due to its greater ethnic variety; the larger proportion of Hispanics, Asians and Blacks, all of whom have higher fertility rates than whites; the upward trajectory of its population projections for three more decades, the higher percentage of young people, and the higher total fertility rate which hovers just above replacement level.

[48] *Opinion on a Project to Fluoridate Drinking Water*, Comité d'éthique de santé publique, March 2012, http://www.inspq.qc.ca/pdf/publications/1422_AvisProjetFluorationEauPotable_VA.pdf.
[49] Ibid., p. 8.

This is something that was understood back in the 1960s when John D. Rockefeller ran the Commission on Population Growth and the American Future, one in a long line of presidential organizations he chaired or initiated for the purpose of containing population growth proactively and globally; a lifelong obsession for the Rockefellers to which they have dedicated billions over the past half century. The graphs that accompanied the Commission's 1969 report show that the U.S. government had accurate projections of what would happen to the US population if its TFR was 3 as opposed to 2 children per women. In fact history has shown that their projections slightly undershot the actual growth that took place, despite their colossal effort to poison the populace to infertility.




Australia and New Zealand, as high immigration countries, are and always have been in the same boat as the US and Canada, which is why their fluoridation agendas are equally determined and remain undeterred by backlash from the population who is unaware of its true purpose.

## INDICATOR 6

Even though all European countries save for Ireland have abandoned and some even banned water fluoridation due to backlash from their people, governments have gone out of their way to justify their decisions in legal and social terms and not in public safety and health terms. This was done intentionally in consideration of the US and the UN so as to shelter the policy from future attack and not spoil it for countries that are still using it or that intend to use it in the future. There is no other extrinsic mechanism than water fluoridation that will cause crude birth rates to drop suddenly resulting in a stationary population. Water fluoridation is too effective, cheap and politically convenient as a population control method to give away by exposing it to the public. It would also be suicide for the people and authorities responsible for the carnage, considering its countless victims and the horrible damage done to the genetic inheritance of the world.

Instead of coming clean, European parliaments and courts used three arguments to justify the change in policy. Their public statements assert that water fluoridation is one or all of the following: uneconomical, since only 0.54% of the water is used for drinking; un-ecological, as it is an environmental load by a foreign agent; and unethical, as it constitutes mass medication for dental health.[50] No European government ever whispered that water fluoridation constitutes mass poisoning for the purpose of sterilizing humanity.

To blur obvious correlations to water fluoridation Europe has gone even further and deceived the world by hiding the extent of fluoridation and the fact that all European countries both East and West did it at one time or another in one form or another, but few admitted it. After World War II Europeans realized that the only way they could prevent future conflict over resources is to ensure they live within their means. It was obvious that this could only happen if they achieved a stationary (non-growing) population. The best way to accomplish such an enormous politically and culturally sensitive task was to find a veiled chemical way of doing it. Water fluoridation was known to work since the Nazis had used it on Jews and the Soviets on prisoners. Europeans decided to use it too, but on their own people because it is effective, cheap and the only way in which they could hide from the population their ambitious demographic goals.

Two statistical curiosities allow me to say this without hesitation. One, the first European countries to reach fertility rates below replacement level are city-states and small nations (i.e. less than 10 million people); and two, fertility rates decreased suddenly in the cities but not in the countryside and the gap between the rural and urban population persisted for a long time.

By 1975, all Europe's small nations and city-states (except for Greece and Portugal, who followed shortly after in 1983 and 1984 respectively) reached below replacement level fertility rates within the same period of time: Andorra, Austria, Belgium, Croatia (formerly part of Yugoslavia), Denmark, Finland, Estonia (formerly part of the Soviet Union), Denmark, Finland,

[50] Water Fluoridation in Eleven Countries, *Soc. Sci. Med*., Vol. 16, pp. 2155-58, 1982.

Hungary, Latvia (formerly part of the Soviet Union), Luxembourg, Netherland, Norway, Sweden and Switzerland. Why would city-states and small nations lower their fertility before the larger nations if socio-economic factors are presumably responsible for Europe's demographic transition to low fertility? These nations are too different from one another politically, economically, culturally and geographically to ascribe their transition to similar circumstances or to family planning policies. The only reasonable answer is that they shared a common denominator beyond their smallness, an external factor that caused their crude birth rates to drop simultaneously and that defied all divides: East/West/South, communist/capitalist, developed/developing/non-developed, agrarian/industrial, Catholic/Protestant/Orthodox/Atheist, liberal/conservative, sexually emancipated/sexually prudish, and with or without high female participation in the workforce. Water fluoridation is that factor and the missing link that triggered their sudden reproductive change. Being small in surface area and population it was much easier to convert their entire public water systems to fluoridation than it would have been for large countries and this enabled them to reach a majority of their people in a short time. As a result, within a decade these diverse countries dropped to less than two children per couple.

Just as it is easier and faster to fluoridate entire nations if they are small, it is also easier and faster, not to mention more cost-effective, to fluoridate the water in the cities first. The process starts in the largest cities as the investment promises the greatest rewards when many people can be accessed at once. I assert that water fluoridation constitutes an important and still un-confessed and unrecognized reason why declines in fertility rates always start in the cities and are far more rapid and enduring than in the countryside.

This assertion is supported by the higher incidence of infertile couples in urban than in rural areas across Europe and the United States, where water and/or salt fluoridation have been used for decades. A recent comprehensive review states:

> *"Fertility levels are higher in rural areas and small towns and lower in large cities. This pattern has been observed for the U.S. (Heaton et al. 1989; Glusker et al. 2000), England and Wales (Tromans et al. 2008), France (Fagnani 1991), the Netherlands (Mulder and Wagner 2001; De Beer and Deerenberg 2007), Italy (Brunetta and Rotondi 1991; Michelin 2004), Germany and Austria (Hank 2001; Kulu 2006), the Nordic countries (Thygesen et al. 2005; Kulu et al. 207), the Czech Republic (Burcin and Kučera 2000), Poland and Estonia (Vojtechovska 2000, Kulu 2005; 2006) and Russia (Zakarov and Ivanova 1996)."*[51]

In the U.S., where the fluoridation process now spans two generations and is more extensive than anywhere else for this long period of time, the damage is most severe and consequently the difference between rural and urban areas more pronounced than anywhere else, with infertility as

[51] Hill Kulu, *Why Fertility Levels Vary between Urban and Rural Areas?* School of Environmental Sciences, University of Liverpool, April 2011, http://peer.ccsd.cnrs.fr/docs/00/71/49/30/PDF/PEER_stage2_10.1080%252F00343404.2011.581276.pdf.

high as 79.5% in urban compared with only 20.5% in rural settings.[52] Other contributing factors aside, this seems to suggest that the effect of fluoridation on fertility is cumulative and therefore a second generation raised on fluoridated water will experience higher incidence of reproductive problems and consequently higher infertility ratios than the first. This might explain why European countries like Norway and Sweden, which have recently adopted pro-natalist policies to boost their FTRs because their populations are shrinking too fast and people are demanding action, are registering only modest success. No amount of financial incentives and flexible work hours to get people to have more children can compensate for decades of sustained chemical attack on the reproductive systems of their citizens.

One thing is clear, country folks spared the chemical poisoning of their reproductive systems do not have to contend with infertility problems caused by mass poisoning. One other thing is equally clear, namely that Europe, despite its posturing about lowest-low fertility rates (i.e. less than 1.3 children per woman), will not abandon salt, tap water, bottled water and/or milk fluoridation (all of which are methods of fluoridation employed by European countries to various extents) until the EU and UN leadership have decided that the optimal population has been reached. By the same token, the high immigration countries (the U.S, Canada, Australia and New Zealand) as well as those countries across the world with medium fertility levels (i.e. 2.2 to 4.9 children per woman) and the will to lower them through water or salt fluoridation will proceed with their mass fluoridation programs until well after they achieve their demographic targets, at which point they will pursue less drastic methods to maintain an ideal birth rate.

My guess is that their targets are measured in terms of population density and that the ideal population density is dictated by the ability of the land and its resources to sustain that population with little or no help from the outside. A fertile land rich in resources will support a much higher population density than an arid land poor in resources.

That an optimal population density must be the criteria determining the targeted optimal population for any given country, may explains why Australia's water fluoridation program is so much more aggressive than Canada's. Australia is mostly desert, it is some 20% smaller than Canada, poorer in natural resources and its population is growing at a faster annual rate of 1.4% compared to Canada's 1%. Australia's ideal population density, therefore, would have to be smaller than Canada's. Due to their large size and low population density, however, both countries have room for more people, which cannot be said about Europe.

Whatever the criteria used for determining the ideal population for each country, fact is that as long as demographic considerations outweigh human rights there no longer is an individual choice on the matter of family size. As long as governments pursue hidden demographic agendas through hidden means, we the people are not only robbed of our rights but also of the

[52] Roy Ann Sherrod, An Assessment of Infertility in a Rural Area**,** *Online Journal of Rural Nursing and Health Care*, vol. 4, no. 1, Spring 2004, http://www.rno.org/journal/index.php/online-journal/article/viewFile/130/128.

opportunity to develop a global consciousness and to think and act accordingly. Our rights, health, wellbeing and the continuity of our lineages are irrelevant and are freely sacrificed by our governments because they stand in the way of a global and secret depopulation agenda achieved through immoral means and at an enormous cost to the gifts conferred on us by eons of natural selection.

## INDICATOR 7

During the last and most difficult phase of fertility reduction from 3 to 2 children per couple, salt fluoridation has been used as an alternative to water fluoridation. This is the path taken in parts of Europe starting with Switzerland where the novelty of fluoridated salt was first introduced in 1955 and eventually spread throughout the German-speaking part of Europe and also to France.

The notion that fluoride enhanced salt is needed to supplement our intake of naturally occurring fluoride in food is ludicrous when one considers its prevalence in common foods and that toothpaste and dental products contain more than enough fluoride to prevent tooth decay. Yet against all logic, a large part of Europe uses fluoridated salt today. Against all logic, fluoridated salt is also government subsidized and therefore cheaper. The logic, of course, is hidden. Fluoride is needed not for its purported benefits to dental health but for its depressing effects on fertility.

Salt fluoridation is quickly replacing water fluoridation as the method of choice for mass sterilization in developing countries. It is preferred by countries that find water fluoridation too contentious, too expensive or technically unfeasible due to widespread use of well-water, complex systems of aqueducts, or underdeveloped water treatment infrastructures.

In 2011 alone the Pan American Health Organization (PAHO) announced that the use of fluoridated salt was extended to 350 million people when it launched a massive program in Bolivia, the Dominican Republic, Honduras, Nicaragua, Panama and Venezuela. This assertion however merely makes public programs that had been in effect covertly for years, as a 2008 publication proves when it declared:

DMFT-12 Indicators and Status of Salt Fluoridation

| Country | DMFT-12 (yr.) Survey results | National Salt F. Program |
|---|---|---|
| Belize | In progress (99) | In progress |
| Bolivia | 4.67 (95) | Yes |
| Colombia | 4.80 (80) | Yes |
| Costa Rica | 4.90 (92) | Yes |
| Cuba | 2.90 (89) | In progress |
| Dom Rep | 4.40 (97) | In progress |
| Ecuador | 2.94 (96) | Yes |
| Grenada | 5.52 (91) | Projected |
| Guatemala | In progress (99) | In progress |
| Guyana | 1.33 (95) | Projected |
| Honduras | 3.7 (97) | In progress |
| Jamaica | 1.08 (95) | Yes |
| Mexico | Pend (99) | Yes |
| Nicaragua | 2.81 (97) | In progress |
| Panama | 3.61 (97) | Yes |
| Paraguay | In progress (99) | Yes |
| Peru | 3.09 (90) | Yes |
| Uruguay | 4.10 (92) | Yes |
| Venezuela | 2.12 (97) | Yes |

Source: PAHO, September 1999

*"It is the intention of PAHO along with its member governments to pursue national programs of salt fluoridation for the majority of the 35 member countries in the region (exceptions are Argentina, Brazil, Canada, Chile, Puerto Rico and the United States of America, these countries are already fluoridating water). At present 16 countries have already begun a program of salt fluoridation and are at various stages in the program."*[53]

The same publication lets the cat out of the bag entirely when it lists in table format the status of dental survey results and salt fluoridation programs throughout Latin America as of 1999. It is thus we find out the real truth about salt fluoridation and that

[53] Estupinan-Day D., *Overview of Salt Fluoridation in the Region of the Americas, Part I: Strategies, Cost-Benefit Analysis, and Legal Mechanisms utilized in the National Programs of Salt Fluoridation*, p. 1, Salt 2000, 8th World Salt Symposium, Volume 2, pp. 983-988, 2000, http://www.fdiworldental.org:8080/sites/default/files/assets/Fluoride_Consultation/Salt_Fluoridation/Overview_Salt_Fluoridation_PartI.pdf

already in 1999 eleven countries (Bolivia, Colombia, Costa Rica, Ecuador, Jamaica, Mexico, Panama, Paraguay, Peru, Uruguay and Venezuela) had fully developed national salt fluoridation schemes, that an additional six countries (Belize, Cuba, Dominican Republic, Guatemala, Honduras and Nicaragua) had schemes 'in progress', and that two countries (Grenada and Guyana) had 'projected' salt fluoridation schemes.

A 2005 PAHO publication identifies the following advantages of salt fluoridation:

> *"The potential applicability of using F-salt was based on: (1) the success of the programme implementation in Switzerland, (2) the universality of salt use throughout society, (3) access to all communities (both urban and rural) at all socio-economic levels, (4) the experience of salt iodization and knowledge of operators in addition of compounds to salt and compatibility with iodization, (5) potential low cost, reduced needs for equipment, installations, compounds and training, (6) lack of requirement for referenda and additional legal procedures frequently used in approving water fluoridation, (7) salt was a government product in several countries and a private sector initiative in others, (8) little requirement for additional human resources, and (9) the consistency of salt intake."*[54]

The same publication informs us that the project of fluoridating salt in the Americas began in 1963 under the direction of PAHO, with the collaboration of the US National Institutes of Health, the Colombian authorities and the University of Antioquia in Medellin, Colombia. Funding was supplied by the US National Institute of Dental Research (USPHS grant DE-01848). The state of Antioquia was chosen to start with because salt production there was controlled by the Colombian Government. The dirty work of poisoning innocents was done by the Faculty of Dentistry at the University of Antioquia with poison supplied by Monsanto Chemicals St. Louis in the form of fluoride mixed with pyrophosphate and monophosphate for addition to salt.

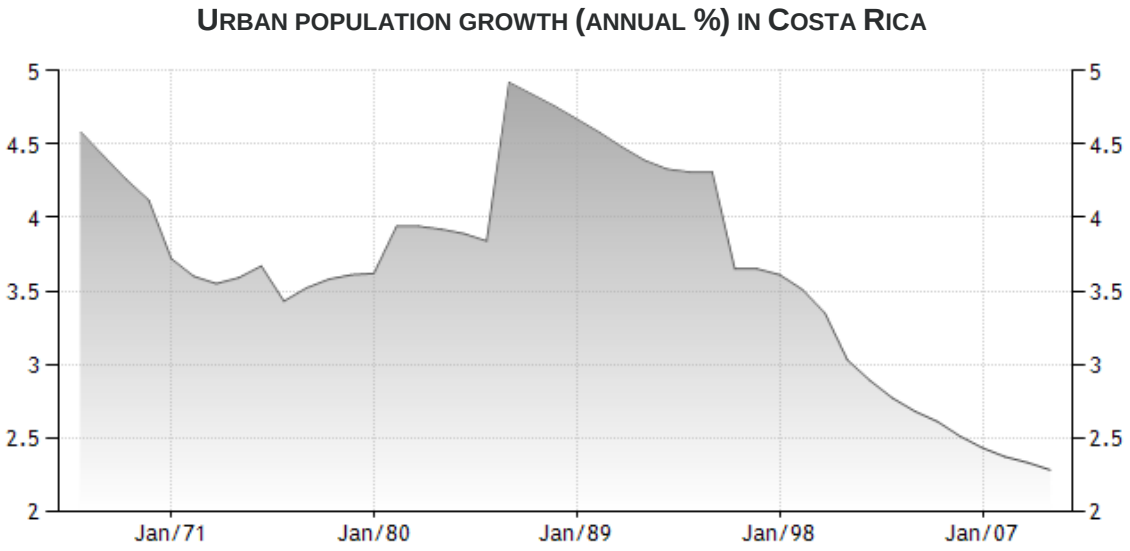
Then in 1977 an international meeting was convened in Medellin, Colombia, involving 12 countries (Brazil, Colombia, Finland, Guatemala, Mexico, Panama, Sweden, Switzerland, Spain, Hungary, United States, Venezuela), six of which had experience in the addition of fluoride to domestic salt; the six being Switzerland, Hungary, Finland, Colombia, Panama and the US. This paved the way for continent-wide salt fluoridation.

**Jamaica** and **Costa Rica** were used as testing grounds by the UN when a program for universal use of fluoridated salt was started in both countries in 1987. The countries were chosen for a reason, their fertility rates had plateaued at a TFR of 3.5 and no amount of effort on the part of their family planning programs seemed to work.[55] Fluoridated salt, however, worked beautifully and within ten years the magic target, replacement rate, was reached at the same time in both

[54] George M. Gillespie & Ramon Baez, Development of salt fluoridation in the Americas, Schweitz Monatschr Zahnmed, 2005: 115: pp. 663-669, http://www.sso.ch/doc/doc_download.cfm?uuid=95531E4CD9D9424C4F11EB2E1FCFF325&&IRACER_AUTOLINK&&

[55] Madrigal, J., Sosa, D., Gamez, M., Rosero, L., Morris, L. & Oberle, M. (1987). Encuesta Nacional de Fecundida y Salud Costa Rica 1986. *Associacion Demografica Costarricense*, San Jose, Costa Rica.

Hispanic Costa Rica and black Jamaica, countries that have nothing in common. In Jamaica the child population declined from about 47% in 1970 to 30% in 2004 and is projected to decline to around 20% by 2050. Costa Rica experienced even more drastic declines.




Sex education and the provision of comprehensive contraceptive and abortion services had reached their limit in Jamaica and Costa Rica. These conventional methods devised to pursue demographic results through societal manipulation of birth rates to balance death rates had hit an impenetrable cultural wall, the desire to have a large family. A fertility survey completed in 1986 in Costa Rica showed that the median desired family size was 3.8 children for urban and 4.8 for rural areas.[56] Demographers and population planners expected to hit this wall as they already knew that there is no empirical or theoretical ground for a switch from "irrational", uncontrolled fertility to "rational", controlled fertility.[57] The government needed an extrinsic tool to override the people's natural predilections for large families and the WHO came to the rescue with salt fluoridation.

The money necessary for family planning was funneled through international organizations and the exact share was (and continues to be) kept secret.[58] Lack of government commitment to the family planning program by the Carazo administration (1978-1982) and its refusal to expand family planning services, formally legalize sterilization, legalize abortion (which at the time was punishable by 1-3 years in jail), set specific targets for population reduction, and introduce fluoridated water or salt met with the disapproval of the depopulation programmers at the World

[56] Ibid.
[57] Harris, M. & Ross, E.B. (1987). *Death, Sex and Fertility*. Columbia, New York, USA.
[58] Holl, Kare D., Daily, Gretchen C. & Ehrlich, Paul R. (1993). Causes and Remedies of the Fertility Plateau in Costa Rica: A Review, http://hsblogs.stanford.edu/morrison/files/2001/03/66.pdf.

Bank, USAID, WHO and the UN, who promptly downgraded the ranking of Costa Rica's family planning program from moderate to weak between 1972 and 1982.[59]

All that changed when the more UN compliant administration of Oscar Arias Sanchez (1986-1990) came to power and opened the country to universal salt fluoridation, at which time Costa Rica became a darling of the United Nations Population Fund (UNFPA).

While salt fluoridation has become ubiquitous in Latin America starting with Jamaica and Costa Rica in 1987 and gradually extended to the rest of the continent in just two decades, salt fluoridation had its birth in **Switzerland.**

Water fluoridation was not and could not be used in Europe's German-speaking countries, the reason being that its use was still fresh in the memory of many of its citizens who had personally witnessed and had been a party in how the Nazis employed it against Jews in the ghettoes and in concentration camps. These countries (i.e. Germany and Austria), along with Poland, where many of the largest concentration camps had been located, had to find a different method of delivering fluoride into their citizens on a continuous basis and in quantities large enough to depress their fertility. They also had to wait long enough for the memory of fluoridated water's ugly purpose to fade away along with the death of the older generation. That is why salt fluoridation did not begin in Germany and Austria until 1991. And that is why Switzerland waited until 1955 before it put fluoride into the salt of only one Canton, the Canton of Zurich, and at a low concentration of 90 mg per kg of salt. Having gagged the public's reaction, the government mustered the courage in 1970 to up the fluoride content to 250 mg per kg of salt in the canton of Waadt and a few years later, in 1974, also in the Canton of Glarus. By then, nearly 30 years had passed since the end of World War II, many of the old timers were dead and the new generation of chemists and scientists were deprived of knowledge about fluoride's insidious history as a mass infertility drug.

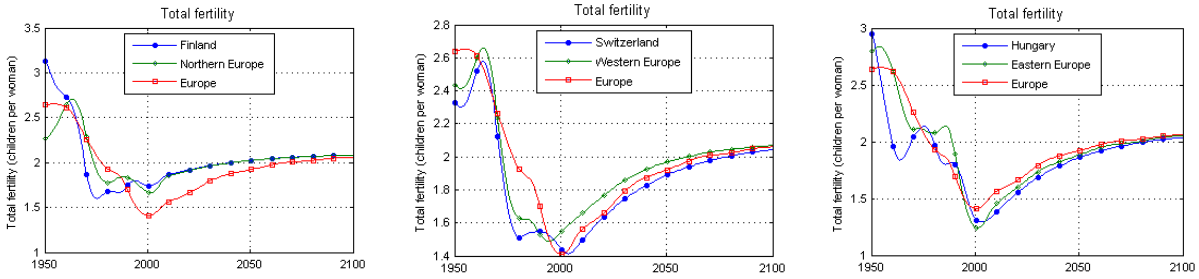
It is also likely that fluoridated salt was secretly employed throughout the country long before its use was openly declared. A recent publication by current insiders of the mass fluoridation/fertilization program mentions "key studies" and "pilot projects" in Finland (in 1952), Hungary (in 1966) and Colombia (between 1964-1972) that were never openly declared and were conducted without the knowledge and consent of the affected populace, who was used as guinea pigs.[60] Even China experimented on its children (and China has so far, at least to my

[59] Lapham, R. J. & Mauldin, W. P. (1984). Family planning program effort and birth rate decline in developing countries. *International Family Planning Perspectives* 10, pp. 109-118, http://www.jstor.org/discover/10.2307/2948060?uid=3739600&uid=2129&uid=2&uid=70&uid=4&uid=3739256&sid=21101200841657.

[60] Thomas Marthaler, George M. Gillespie & Franz Goetzfried, Salt fluoridation in Europe and in Latin America – with potential worldwide, *Kali und Steinsalz Heft* 3/2011, http://www.eusalt.com/pages/presscorner/file.handler?f=111109%20%20German%20Journal%20'Kali%20und%20Steinsalz'%20-%20Salt%20Fluoridation%20in%20Europe%20and%20Latin%20America%20(Print%20Version).pdf.

knowledge, refused to fluoridate its people), though on a much smaller scale and for only a period of three years in the city of Wuhan as part of a controlled study from 1988 to 1991.[61] It is therefore conceivable that Switzerland first used F-salt in secret to make the population pliant before openly legalizing its use. Fluoride is known to affect the brain in ways that make human beings submissive. The mind-altering power of sodium fluoride has earned it the nickname the 'obedience drug'.[62]

It is noteworthy and certainly no coincidence that the first European countries chosen for salt fluoridation – Finland, Hungary and Switzerland - did not have any concentration camps during the war and therefore no direct experience with fluoride as a toxic substance used to control Jews. It is also noteworthy that the Swiss first tested F-salt not on their own people, but on the Fins starting in 1952 and on Hungarians at about the same time judging by their TFR curves, which never had a chance to register a post-war baby boom, unlike Switzerland which did.




One has to also understand that just after the war dental care was not a priority and dentistry was in its infancy. It is ludicrous to think that international studies should have been funded for the sole purpose of combating carries when Europe needed to reconstruct its devastated infrastructure and bombed factories and when people were going to bed hungry. Carires were not a priority then and they are not a priority now for governments. Population control however was a priority for the entire international community and that is why the fluoridated salt trials were funded across multiple European nations in the 50s.

Switzerland was least affected by the Nazi scourge due to its neutrality and the preservation of its sovereignty during World War II. Its people were least likely to know about the secret purpose of fluoridation. The academic community would have been aware of it through the diffusion of research published in the German language and that was likely to exist in university libraries but that was undoubtedly removed by the government. Switzerland was therefore the only German-speaking country that could test and introduce salt fluoridation with the least resistance from the populace.

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[61] Zhang B., Fluoride alternatives for a diverse population in China. Global Consultation on Oral Health through Fluoride, 17-19 November 2006, Geneva, Switzerland/Ferney-Voltaire, France, www.fdiworldental.org:8080/.../Fluoride.../China_fluoride_abstract.d.

[62] Stephen Cooter, Sodium Fluoride: the Obedience Drug, The Arthritis Trust of America, http://www.arthritistrust.org/Articles/Sodium%20Fluoride%20The%20Obedience%20Drug.pdf.

Before salt fluoridation could be introduced, however, the Swiss government would have removed all scientific papers about fluoride and sterility and all historical records from its libraries and institutions. That process was completed in a few years following the end of the war and in 1955 the government was ready to begin the slow and gradual process of conditioning its people to think of fluoridated salt in positive terms as a substance good for dental health.

To be able to compare the efficiency of fluoridated salt with that of fluoridated water and draw scientific parallels based on actual data derived from human subjects, the city of Basel was artificially fluoridated starting in 1962. The fluoridation of Basel's water was stopped in 2003 after it had served its purpose as a source of valuable comparative data. The parallel and partial use of salt and water fluoridation was unique to Switzerland as that is where the salt alternative to water fluoridation was invented, most thoroughly tested and perfected.

Statistical evidence in support of the notion that the countries which housed Nazi concentration camps were spared both water and salt fluoridation for at least two decades after the war comes from Poland. Population statistics from Germany and Austria are not useful due to the fact that their male populations had been decimated in the war and along with them the total fertility rate of both countries. Neither Austria nor Germany needed population control measures, as 25% of their women remained unmarried and childless after the war for dearth of male partners. What they needed is the opposite, population increases, which they achieved through large waves of immigration from Turkey, the Balkan region and the Iberian Peninsula.

A demographic analysis of **Poland**, however, reveals that between 1957 and 1970 its population grew faster than that of any other country in Europe as it maintained the healthiest fertility rate in Europe at a TFR above 3. Poland is also the only country in Europe whose population grew by 59% between 1946 and 1988 (adding 14 million people) and that maintained a trend of population growth until the 1990s.[63] Last, it is one of only two European countries – the other being Romania – whose TFR remained above replacement level until the last decade of the 20th century.

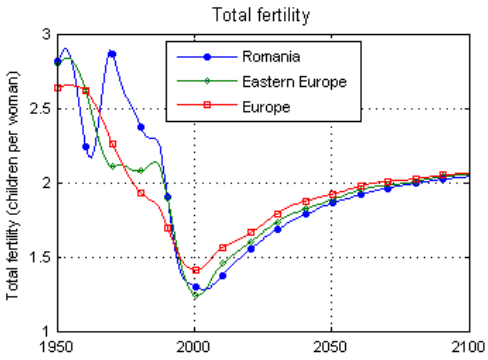
Poland's post-war demographic profile with its uncharacteristically healthy population growth and fertility rates is unique due to the fact that it escaped water and salt fluoridation longer than any other country in Europe. All that changed during the period of transition from communism to capitalism in the 1980s. The most rapid fall in Poland's TFR began in 1993 and coincides with the time when Western products (undoubtedly fluoride-rich) flooded the internal market as the country opened up to the West once communism fell. By 2002, Poland's TFR was at the level of 1.25, where it has remained since, and is among the lowest in Europe.

[63] Stanislawa Golinowska & Agnieszka Sowa, *Health and Morbidity in the Accession Countries: Country Report – Poland*, ENEPRI Research Report No. 29, November 2006, http://aei.pitt.edu/9476/2/9476.pdf.

Demographers are scratching their heads as to how Poland's TFR could have declined in a decade to the low level it took Western Europe 27 years to reach[64] and are at a loss to explain this mystery. The answer, however, is simple; it is through the systemic use of fluoride in products ranging from salt, sugar, milk, mineral water, alcoholic drinks and dental care. But those few who know it invariably decide it is too dangerous to speak up and more prudent and in their own best interest to use their knowledge to seek well-paid positions within the well-funded international institutions in charge of the depopulation agenda.

Poland's remaining honest scientists do the best they can to alert their countrymen of the high levels of fluoride in food and beverages that are now manufactured at home according to EU standards or that come into the country from other parts of Europe through the open market. They have recorded high fluoride contents in supplements and isotonic drinks[65], infants' and children's drinks,[66] and in alcoholic beverages[67]. Unfortunately, few people are listening to their warnings and fewer still bother reading research papers.

Another telling example of what happens to a country's birth and fertility rates when it does not consistently follow the fluoridation policy is **Romania**. In 1960 or a couple of years earlier, Romania began fluoridating its water and like all other communist countries it did not bother telling its citizens or asking for their permission. As a result, the country's TFR went from 3 children per woman to 2.04, thus to replacement level, by 1965.




The country's dictator, Nicolae Ceausescu, changed course and stopped the fluoridation of the public water either for patriotic reasons or most probably to use demography as a means of extorting favorable aid, loans and trading conditions from the West and especially the United States. It may very well be that he used the threat of exposing the global depopulation agenda as leverage. In 1966, he stopped fluoridation and introduced a series of pro-natalist measures such as making divorce difficult and giving material incentives to couples who had three or more

[64] Fratczak, E. (2003), "Przemiany płodności i rodziny w Polsce i Europie: Oceny – interpretacje –teorie – polityka rodzinna" [Fertility and family changes in Poland and in Europe: Evaluation – interpretation – hypothesis – family policy], in Z. Strzelecki (ed.), *Procesy demograficzne u progu XXI w, Polska a Europa* [Demographic processes at the beginning of the 21st century, Poland and Europe], Warszawa.

[65] Murawska Kinga, Kowaleczko Magdalena, Kosicka Karolina E, Bazaczek Anna, Rybicka Marta & Chlubek Dariusz., Supplements, Isotonic Drinks, and Energy Drinks as Potential Sources of Dietary Exposure to Fluorine Compounds in Athletes, Abstract submitted for presentation at the XXXth Conference of the International Society for Fluoride Research, September 5–8, 2012; *Fluoride*, 45 (3 Pt 1) pp.186-7, July-September 2012, http://www.fluorideresearch.org/444/files/FJ2011_v44_n4_p183-187_sfs.pdf.

[66] Smyk Małgorzata, Opejda Agnieszka, Fedyna Agata, Rybicka Marta & Chlubek Dariusz, Fluoride Concentrations in Infants' and children's Drinks in Poland, Abstract submitted for presentation at the XXXth Conference of the International Society for Fluoride Research, September 5–8, 2012; *Fluoride*, 45 (3 Pt 1) pp.199-200, July-September 2012, http://www.fluorideresearch.org/444/files/FJ2011_v44_n4_p183-187_sfs.pdf.

[67] Knop Wojciech H., Dziuban Maciej, Tomasiuk Mikolaj, Brzezowski Jędrzej, Rybicka Marta & Chlubek Dariusz, Fluoride in Alchoholic Drinks, Abstract submitted for presentation at the XXXth Conference of the International Society for Fluoride Research, September 5–8, 2012; *Fluoride*, 45 (3 Pt 1) pp.175-6, July-September 2012, http://www.fluorideresearch.org/444/files/FJ2011_v44_n4_p183-187_sfs.pdf.

children. Within five years of stopping water fluoridation and encouraging births Romania's TFR went back up to 3 children per woman and stayed there throughout the late 70s and early 80s. The effect was so immediate and drastic that the number of live births rose from 273,687 in 1966 to 527,764 in 1967, an increase of 92.8%.

During the 1980s the country was in economic dire straits and there was not enough food to go around, as Romania was in the midst of a national effort to pay back its debt to the West. The TFR suffered and fell naturally to 2.6 during the late 80s and early 90s. The regime fell in 1989, Ceausescu was executed and water fluoridation was reintroduced probably within a year or two (and once again without the people's permission) as part and parcel of Romania's harmonization with the West and undoubtedly as a precondition of its acceptance into the European Union. Consequently, Romania's TFR fell from 2.6 to 1.5 by 1995 and reached a lowest-low fertility rate of 1.28 in 2005.

The adjacent graph illustrates how wildly Romania's TFR rate fluctuated between 1950 and 1980 forming two peaks and then dropping suddenly in 1990 and bottoming out at 1.3 by 2000. No other European country exhibits this TFR profile because Romania was the only one to deviate from the international depopulation agenda by abandoning and then reinstating fluoridation.

It turns out that growing up in Romania under Europe's most feared dictator, as I did, was a gift in terms of reproductive and intellectual health. Romanians, I suspect, will reevaluate Ceausescu's legacy and thank him for saving their children from mass sterilization with fluoride and its negative side-effects in respect to intelligence, DNA integrity, and general health.

It is because Romania was spared fluoridation that in 1965 its rate of natural population increase of 6 per 1,000 was considerably higher than that of say the German Democratic Republic (East Germany) at 3 per 1,000 and Hungary's 2.4 per 1,000. In 1984, even as the country was starving, Romania compared even more favorably with a rate of natural increase of 3.9 per 1,000 as opposed to East Germany's 0.4 and Hungary's 2 per 1,000. East Germany's population had been faithfully controlled with water fluoridation by the Soviets and the country's pliant leadership, and Hungary's population suffered the indignity of being experimented on with fluoridated salt from Switzerland during the 60s and 70s, which is why its TFR fell below replacement level in 1965, the earliest of any European country and at about the same time as Japan's, which, of course, was forced by the United States to fluoridate its water as soon as the war ended.

While scientists are screaming in the wind about the toxic, sterilizing and mutagenic effects of water and salt fluoridation, national and international authorities are pursuing their sterilization agenda undeterred, safe in the knowledge that once fluoridation is introduced in any given country the people's will to resist is destroyed along with their ability to procreate.

They have already taken the most important steps to advance salt fluoridation as the foremost method of global sterilization by creating the necessary legal architecture to ensure its easy global implementation.

1. To advance the development of fluoridated salt in the Americas, a key decision to proceed was taken in Medellin, Colombia, in 1977 at the First International Symposium on Salt Fluoridation, where the results of the U.S. National Institutes of Health (NIH) supported Colombia trial were reviewed in the presence of representatives from the U.S. Public Health Service, the University of Zurich, and the Chief Engineer of the Swiss Rhine Saltworks.[68]
2. The successful 1964 to 1972 trials in Colombia, which compared the advantages of fluoridated salt versus fluoridated water, opened the door to fluoridated salt at country level. As a result, salt fluoridation has increased steadily since 1986 and Colombia, Costa Rica, Jamaica, Mexico and Uruguay have acquired more than 20 years of experience and coverage up to 98%.[69]
3. Belize, Bolivia, Cuba, the Dominican Republic, Ecuador, Peru and Venezuela have active programs and five additional Latin American countries are in the process of implementing salt fluoridation.[70]
4. In countries with weak democratic frameworks and lack of respect for the rule of law, fluoridated salt is forced on the people without public programs but most effectively. Mexico, for instance, has an estimated 90 million people on fluoridated salt and 20 million on fluoridated water (Secretaria de Salud, Mexico, 2011). Bolivia at 40% and Cuba at 60% salt fluoridation are two other examples and both countries are under regimes that purport to be populist not elitist. The depopulation agenda, however, knows no ideological divide because the politicians who decide to turn on their own people are richly rewarded by the international community and given a lifelong seat at the global governance table.
5. Worldwide, the number of countries involved in salt fluoridation approximates those with adjusted water fluoride levels; a success owed to considerably easier implementation procedures, making it more economical than water fluoridation.[71]
6. The European Food Safety Authority (EFSA) has issued an opinion related to the tolerable upper intake level of fluoride and its Scientific Panel on Dietetic Products, Nutrition and

[68] Gilespie G. M., Roviralta G., *Salt Fluoridation*. Pan American Health Organization Scientific Publication 501, Washington D.C., 1986 (ISBN 92 75 11501 X), http://www.ncbi.nlm.nih.gov/nlmcatalog/101260558.

[69] Thomas Marthaler, George M. Gillespie & Franz Goetzfried, Salt fluoridation in Europe and in Latin America – with potential worldwide, *Kali und Steinsalz Heft* 3/2011, http://www.eusalt.com/pages/presscorner/file.handler?f=111109%20%20German%20Journal%20'Kali%20und%20Steinsalz'%20-%20Salt%20Fluoridation%20in%20Europe%20and%20Latin%20America%20(Print%20Version).pdf.

[70] Ibid.

[71] Gillespie G. M. & Baez R., "Development of salt fluoridation in the Americas", *Schweizer Monatsschrift für Zahnmedizin*, Vol. 115: 8/2005, pp. 663-669, http://www.sso.ch/doc/doc_download.cfm?uuid=95531E4CD9D9424C4F11EB2E1FCFF325&&IRACER_AUTOLINK&&.

Allergens has calculated upper fluoride levels for children as well as for pregnant and lactating women, thus opening the door for the commercial use of fluoridated salt.[72]

7. The Fortified Food and Claims Regulations of the European Union (EU, 2006) has approved the mineral fluoride (both as sodium and potassium fluoride) as a food additive and set the Europe-wide legal basis and precedent of salt fortification with fluorides, which supersedes the existing national voluntary regulations for the enrichment of foods with minerals and vitamins.
8. Following a request from the European Commission, the European Food safety Authority (EFSA Panel on Dietetic Products, Nutritions and Allergies) was asked to provide a scientific opinion on the substantiation of health claims in relation to fluoride's effectiveness in the *"maintenance of tooth mineralization".* The Panel did as told and declared fluoride as a well-recognized nutrient.[73]
9. The WHO has made the worldwide improvement of oral health (and its underside mass sterilization) a priority action area. At the Sixtieth World Health Assembly in May 2007, the WHO urged the 193 member states to implement an action plan for promotion and integrated disease prevention (WHO-WHA 60:17, 2007): *"For those countries without access to optimal levels of fluoride, and which have not yet established systematic fluoridation programs, to consider the development and implementation of fluoridation programs, giving priority to equitable strategies such as the automatic administration of fluoride, for example, in drinking-water, salt or milk, and to the provision of affordable fluoride toothpaste.*"[74]
10. The WHO issued an expert consultation report extolling the virtues of salt as the perfect delivery for fluoridation for tooth fortification.[75]
11. The Pan American Health Organization/WHO published the results of the salt fluoridation program in the Americas with guidelines for legislation and implementation so that others may follow suit.[76]
12. To facilitate its easy and global distribution, salt fluoridation is to be linked to existing iodization schemes.[77] That way, *"the ability to include fluoride in domestic salt exists*

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[72] European Food Safety Authority (EFSA), "Opinion of the Scientific Panel on Dietetic Products, Nutrition and Allergies on a request from the Commission related to the Tolerable Upper Intake Level of Fluoride"; *The EFSA Journal* 192, pp. 1-65 (2005), http://www.efsa.europa.eu/en/efsajournal/doc/nda_opinion_ej210_chloride_v2_en1,1.pdf.

[73] EFSA Panel on Dietetic Products, Nutrition and Allergies, "Scientific Opinions on the substantiation of health claims related to fluoride and maintenance of tooth mineralization pursuant to Article 13(1) of Regulation (EC) No. 1924/2006"; *The EFSA Journal* 2009; 7(9): 1212 (ID 275, 276) and 2010; 8(10): 1797 (ID 338, 4238), http://www.efsa.europa.eu/en/efsajournal/doc/1797.pdf.

[74] World Health Organization (WHO), *Resolution WHA 60:17, Oral health: action plan for promotion and integrated disease prevention*, 23 May 2007, Geneva, Switzerland.

[75] World Health Organization (WHO), *Salt as a vehicle for fortification. Report of a WHO Expert Consultation*, Luxembourg 21-22 March 2007, Geneva 2008, http://whqlibdoc.who.int/publications/2008/9789241596787_eng.pdf.

[76] Estupinan-Day S., *Promoting Health. The use of salt fluoridation to prevent dental caries*. Pan American Health Organization (Scientific and Technical Publication No. 615), Washington D.C. 2005.

[77] Petersen P. E., World Health Organization global policy for improvement of oral health – World Health Assembly 2007. *International Dental Journal* (2008) 58, pp. 115-121, http://www.who.int/oral_health/publications/IDJ_June_08.pdf.

*within the provisions of the health statutes and regulations in many countries and permit ready initiation without many of the problems and barriers associated with water fluoridation. Internationally, the addition of fluoride to domestic salt has been included in the revised Codex Alimentarius 150, and is expected that further information will be included in future revisions.*"[78]

13. To aid the depopulation agenda fluoridated salt is to be recorded in the *"generally recognized as safe"* (GRAS) category in U.S. Federal Drug Administration (FDA) regulations.[79]
14. In May 2000, at the 8th World Salt Symposium ("Salt 2000"), executives of the salt industry met with leaders of governments, NGOs and international organizations to discuss how to better collaborate on extending the reach of fluoridated and iodized salt.

The advantages of fluoridated salt are summarized by its promoters as follows:

> *"Politically, it is relatively easy to offer free choice to the consumer to purchase salt with or without fluoride: this does not result in anti-fluoride activities, since it provides freedom of choice, is an accepted vehicle, and a better quality product. From a public health perspective, high market share, or better universal use of fluoridated salt, will always be preferable. Lower socio-economic strata tend to make consistently less use of possibilities of prevention, and the majority reached only under conditions of universal or near-universal usage. However, where free choice is involved, the use of fluoridated salt must be promoted continually to have a community effect."*[80]

What this means once we have deciphered the code and learned to read between the lines is that salt fluoridation is politically easy to implement as people are free to use it or not. However, it is only effective as a population control tool if the vast majority of the salt on the market is fluoridated and it can then be sold at lower prices than non-fluoridated salt. The poor and the uneducated who do not know the true purpose of fluoridated salt will buy it as it is cheaper, universally available and heavily promoted. Those intelligent enough to know how to protect themselves and their children, will seek out and buy only non-fluoridated salt and in this way, the leadership reckons, the genetic lines of the smart survive while the genetic lines of the dumb die out within three or four generations.

The beauty of fluoridated salt is that it does not have the bad rap of fluoridated water. People have not learned to mistrust it yet because no public campaigns against it have set a precedent and the few individuals with the scientific knowledge to ascertain its ill-effects can simply avoid buying it and do not have to go through the trouble of educating the public and organizing campaigns and referenda. They look after their own families and forget about the rest of the

[78] Thomas Marthaler, George M. Gillespie & Franz Goetzfried, Salt fluoridation in Europe and in Latin America – with potential worldwide, *Kali und Steinsalz Heft* 3/2011, p. 13, http://www.eusalt.com/pages/presscorner/file.handler?f=111109%20%20German%20Journal%20'Kali%20und%20Steinsalz'%20-%20Salt%20Fluoridation%20in%20Europe%20and%20Latin%20America%20(Print%20Version).pdf.
[79] Ibid., p. 12.
[80] Ibid., p. 13.

population. When the water in the well is poisoned, however, they cannot to that, as everyone is forced to drink from it.

Human beings have a visceral reaction to tampered toxic water since nothing is more vital to life or more elemental than clean drinking water. The same cannot be said about salt and that is why it makes such a great delivery vehicle for mass infertility medication.

Even better, it is consumers not governments that pay for fluoridated salt and therefore for being secretly medicated. While water fluoridation has to be paid for with public money, fluoridated salt is an essential food item consumers pay for out of their own pockets.

*Conclusion:* Fluoridation salt and water programs are the extrinsic methods of choice for population reduction in the last and most difficult phase of the Bayesian curve, TFR 3 to TFR 2, and for discreetly and without political cost keeping the TFR indefinitely at well below replacement level. It works because it is covert and facilitates the survival of intelligent individuals and the demise of the stupid. It is deemed necessary because the ideal family size for most cultures is 3 children, which is above replacement level fertility and can no longer be accepted at a time when the global population is already too large, half of humanity is starving and the Earth has passed its environmental tipping point.

## INDICATOR 8

Bottled water is a much more effective and non-wasteful way of getting people to ingest enough fluoride to lower fertility. It also has the advantage, like salt fluoridation, of transferring the cost of sterilization to the consumer and freeing the government from the financial burden of mass medicating the people to infertility.

The method has been used successfully by Italy and Spain, which is why they are also the first countries in Southern Europe to reach replacement level fertility (in 1977 and 1982 respectively) and shortly after also lowest-low fertility (i.e. a total fertility rate below 1.3 children per woman), which both countries reached in 1993.

Italians lead the Europeans in per capita bottled water consumption at 187 liters per person per year and Spaniards are not far behind and in fifth place at 124 liters.[81] Both countries have Europe's most mature markets for bottled mineral water consumption (next to France), which is why they will have chosen this method to deliver fluoride into their citizens.

Bottled mineral water tests done on Spanish product show extremely high levels in five brands and levels above 2 ppm in many others. Many Italian brands also show elevated fluoride contents, as do several other European waters.[82]

In fact, the European countries with the highest consumption of bottled mineral water – Italy (at 187 liters per person per year), Belgium (148 L), Luxembourg (148 L), Germany (134 L), France (132 L), Spain (124 L), Hungary (111 L), Switzerland (108 L), Slovenia (107 L), Croatia (101 L), Czech Republic (92 L) and Austria (91 L) are also the countries that have reached low fertility rates and many even lowest-low fertility rates faster than most other European countries. Few, however, have admitted to using fluoridated tap water or fluoridated salt, which leads me to believe that they have all used bottled mineral water to various degrees either as a primary, secondary or complementary method of delivering fluoride into people's bodies. Belgium, France and Luxembourg have eased up on the fluoridation of bottled/tap water and on the extent of salt fluoridation as soon as they dipped below replacement level and that is why their TFR rates have bounced back somewhat to just below replacement level in the first decade of the 21st century.

The water destined for bottling can be easily "enhanced" without the people's knowledge by injecting fluoride at source into the aquifer or spring. Once in the water, given Europe's policy of prohibiting the alteration of spring water's natural composition[83], it will end up in a bottle and the consumer will ingest a high amount of fluoride without knowing its true source.

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[81] Per-Capita Bottled Water Consumption by Top Countries, 1999–2010 (Liters per Person per Year), http://www.worldwater.org/datav7/data_table_19_per_capita_bottled_water_by_country.pdf.

[82] Fluoride measurements in mineral waters, http://poisonfluoride.com/pfpc/html/mineral_waters.html.

[83] Directive 2009/54/EC Of the European Parliament and Council, 18 June 2009, on the exploitation of natural mineral waters, http://eur-lex.europa.eu/LexUriServ/LexUriServ.do?uri=OJ:L:2009:164:0045:0058:EN:PDF

The high level of political corruption and the involvement of the Mafia in the illegal dumping of toxic waste into the environment make this a plausible explanation as to why Italy, which is the seat of the Catholic Church and a very religious country as well as traditional and family oriented, should have such a chronically low fertility rate.

The secret project to fluoridate Italy's water – either directly or by illegally dumping fluoride-rich toxic waste across the country – may well be the beginning of the close relationship between organized crime and the political establishment in Italy and explains better than anything else why the Mafia is impossible to eradicate. The bond that keeps them united is their common task of keeping the Italian people intoxicated and infertile. How else is one to explain the Triangle of Death in Sicily[84], where millions of tons of toxic waste have been dumped by the Mafia, or the 5000 illegal or uncontrolled dump sites throughout Italy?[85]

Italy is the only country in the world where the criminal element of society is in charge of disposing of the nation's toxic waste and can make a €20 billion profit in the process.[86] It also owns an estimated 30% of the country's waste disposal companies, including those that deal with toxic waste. Anywhere else this would have been stopped before it began. In Italy however, the Mafia and the political class are tied at the hip by the water fluoridation project.

Of course, the collusion between corporations and governments elsewhere is no less criminal than the collusion between the Mafia and Italian politicians, as they too dispose their toxic waste by dumping it into our drinking water, but they do it in a legalistic and overt way, whereas the Italian solution is a purely illegal and covert one. The goal however is the same, our sterilization and the side benefit of profiting from it.

Between 1965 and 1985, **Spain** experienced a dramatic reduction in its birth rate, from 21 to 13 per thousand, a drop of approximately 38%. In 1975, with an estimated base population of 35 million, the country recorded about 675,000 live births, but in 1985, with an estimated population of 38 million, Spain had only about 475,000 live births; that is one-third fewer. I contend that Spain has widely fluoridated the tap water without telling its citizens and that it still does so to a far greater extent than the 10% fluoridation area it currently declares. Spain also has some of the highest concentrations of fluoride in several brands of its bottled mineral water, concentrations that are downright toxic (Aguas Verdes, 15.1 ppm; Imperial, 7.8 ppm; Malavella, 7.7 ppm; San Narciso, 7.7 ppm; Vichy Catalan, 7.3 ppm).[87]

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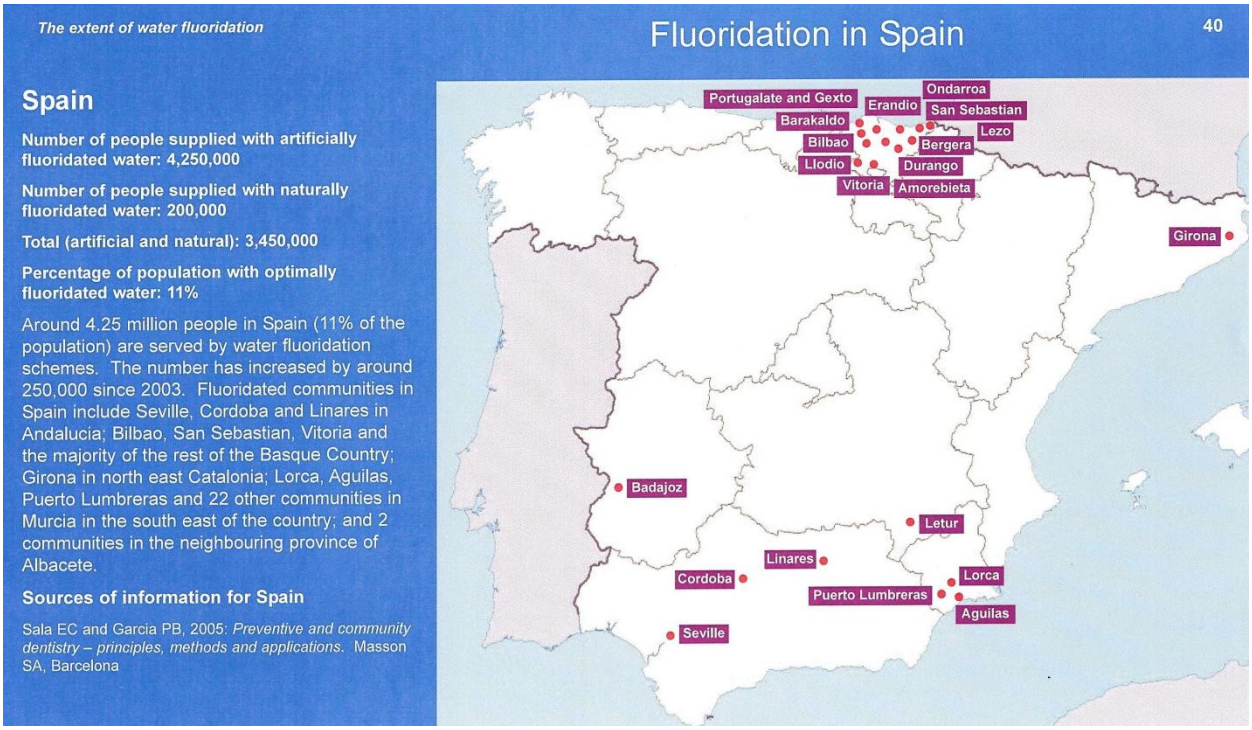
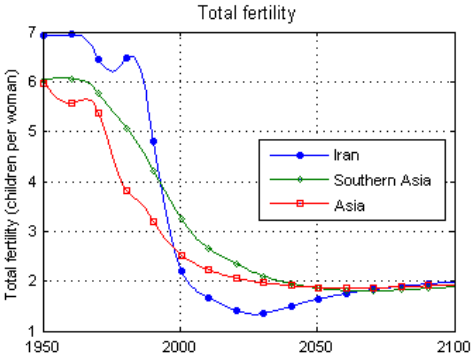
[84] "Discariche piene di rifiuti tossici quello è il triangolo della morte". *la Repubblica*. 31-08-2004. http://www.repubblica.it/2004/h/sezioni/cronaca/acerra/lancet/lancet.html.
[85] *Triangle of death (Italy)*, Wikipedia article, http://en.wikipedia.org/wiki/Triangle_of_death_(Italy).
[86] Michael Day, "Mafia earning €20bn from dumping toxic waste", *The Independent*, 8 June 2011, http://www.independent.co.uk/news/world/europe/mafia-earning-euro20bn-from-dumping-toxic-waste-2294720.html
[87] *Fluoride in Mineral Waters*, 2000-20009 PFPC, http://poisonfluoride.com/pfpc/html/mineral_waters.html.

Interestingly, the most intensely fluoridated area of Spain and the only one whose public water is fully fluoridated is the Basque country. That is no accident, but an intentional policy on the part of the Spanish government to firstly lower the numbers of the Basque people by rendering them infertile and secondly medicating them into obedience and submission and thus preventing them from pursuing separatism.


The extent of water fluoridation
Fluoridation in Spain
40
Spain
Number of people supplied with artificially fluoridated water: 4,250,000
Number of people supplied with naturally fluoridated water: 200,000
Total (artificial and natural): 3,450,000
Percentage of population with optimally fluoridated water: 11%
Around 4.25 million people in Spain (11% of the population) are served by water fluoridation schemes. The number has increased by around 250,000 since 2003. Fluoridated communities in Spain include Seville, Cordoba and Linares in Andalucia; Bilbao, San Sebastian, Vitoria and the majority of the rest of the Basque Country; Girona in north east Catalonia; Lorca, Aguilas, Puerto Lumbreras and 22 other communities in Murcia in the south east of the country; and 2 communities in the neighbouring province of Albacete.
Sources of information for Spain
Sala EC and Garcia PB, 2005: Preventive and community dentistry – principles, methods and applications. Masson SA, Barcelona
Portugalate and Gexto
Ondarroa
Erandio
San Sebastian
Barakaldo
Lezo
Bilbao
Bergera
Llodio
Durango
Vitoria
Amorebieta
Girona
Badajoz
Letur
Linares
Cordoba
Lorca
Puerto Lumbreras
Aguilas
Seville

Judging by the fact that the Basque region has been quiet since water fluoridation was introduced and that most if not all Basque attacks on Spanish political targets were orchestrated by Basques living and operating from France, one can conclude that the fluoridation policy is working as planned.

**Iran** is one of the few countries in the world that is proceeding with the fluoridation of its tap and bottled water, and the only country in the world (as far as I know) that is also adding fluoride to baby formula and powder milk, all at the same time. No wonder the country achieved the fastest drop in fertility rate in history going from 6 children per woman in 1990 to 2 in 2010!



Iranian scientists are doing their best to tell people how to de-fluoridate the water through various methods: agricultural waste rice husk[88], electro-coagulation using iron and aluminum electrodes[89], adsorption with Sargassum algal biomass[90], coagulation with Moringa Oleifera seed extract[91], adsorption by modified Fly Ash[92], partial freezing[93], adsorption by pumice[94], defluoridation by acid-modified clinoptilolite[95], adsorption using barley husks and barley husk ash[96], nanofiltration membranes[97], application of modified wheat straw[98], defluoridation with

[88] Ashrafi Seyed Davoud, Mahvi Amir H., Farrohki Maehrdad, Asgari Ghorban, Jafari Ali, Rezaee Reza & Hoseini Mohammad Hoseini, "Fluoride removal using agricultural waste rice as a low-cost adsorbent", Abstracts submitted for presentation at the XXXth Conference of the International Society for Fluoride Research, September 5–8, 2012; Szczecin, Poland; Fluoride, 45(3 pt 1) pp. 151-152, July-September 2012, http://www.fluorideresearch.org/444/files/FJ2011_v44_n4_p183-187_sfs.pdf.

[89] Bazrafshan Edris & Mahvi Amir H., "Fluoride removal by an electro-coagulation using iron and aluminum electrodes", Abstracts submitted for presentation at the XXXth Conference of the International Society for Fluoride Research, September 5–8, 2012; Szczecin, Poland; Fluoride, 45 (3 Pt 1) pp.154-155, July-September 2012, http://www.fluorideresearch.org/444/files/FJ2011_v44_n4_p183-187_sfs.pdf.

[90] Hoseinin Mohammad, Mahvi Amir H., Yaghmaeian Kamiar, Jafari Jalil, Safari Gholamhosein, Kamani Hosein, Jafari Ali & Ashrafi Seyed Davoud, "Removal of Fluoride from aqueous solution by biosorption onto Sargassum biomass", Abstract submitted for presentation at the XXXth Conference of the International Society for Fluoride Research, September 5–8, 2012; Fluoride, 45 (3 Pt 1) pp.168-169, July-September 2012, http://www.fluorideresearch.org/444/files/FJ2011_v44_n4_p183-187_sfs.pdf.

[91] Jafari Ali, Mahvi Amir H., Godini Hatam, Rezaee Reza, Ashrafi Seyed Davoud & Hoseini Mohammad, "Experimental design and response-surface modeling for optimization of fluoride removal from water by Moringa Oleifera seed extract", Abstract submitted for presentation at the XXXth Conference of the International Society for Fluoride Research, September 5–8, 2012; *Fluoride*, 45 (3 Pt 1) pp.169-170, July-September 2012, http://www.fluorideresearch.org/444/files/FJ2011_v44_n4_p183-187_sfs.pdf.

[92] Ghadiri Seyed Kamal, Mahvi Amir H., Khazaei Mohammad, Talebi Seyed Solmaz, Vaziri Yaser, Siavoshi Fateme, Kaseb Peyman & Yousefi Nader, "Adsorption of fluoride from aqueous solution by modified Fly Ash", Abstract submitted for presentation at the XXXth Conference of the International Society for Fluoride Research, September 5–8, 2012; *Fluoride*, 45 (3 Pt 1) p.175, July-September 2012, http://www.fluorideresearch.org/444/files/FJ2011_v44_n4_p183-187_sfs.pdf.

[93] Hosseini Sara Sadat, Mahvi Amir H., Hosseini Seied Amir, "Partial freezing – a new approach for fluoride removal from water", Abstract submitted for presentation at the XXXth Conference of the International Society for Fluoride Research, September 5–8, 2012; *Fluoride*, 45 (3 Pt 1) p.182, July-September 2012, http://www.fluorideresearch.org/444/files/FJ2011_v44_n4_p183-187_sfs.pdf.

[94] Mahvi Amir H., "Fluoride adsorption by pumice from aqueous solutions", Abstract submitted for presentation at the XXXth Conference of the International Society for Fluoride Research, September 5–8, 2012; *Fluoride*, 45 (3 Pt 1) pp.182-183, July-September 2012, http://www.fluorideresearch.org/444/files/FJ2011_v44_n4_p183-187_sfs.pdf.

[95] Maleki Afshin, Mahvi Amir H., Daraii Hiua, Rezaee Reza & Ebrahimi Roya, "Defluoridation of water by acid-modified clinoptilolite", Abstract submitted for presentation at the XXXth Conference of the International Society for Fluoride Research, September 5–8, 2012; *Fluoride*, 45 (3 Pt 1) p.183, July-September 2012, http://www.fluorideresearch.org/444/files/FJ2011_v44_n4_p183-187_sfs.pdf.

[96] Maleki Afshin, Daraii Hiua, Mahvi Amir, Rezaee Reza & Ebrahimi Roya, "Fluoride adsorption from aqueous solutions using barley husks and barley husk ash", Abstract submitted for presentation at the XXXth Conference of the International Society for Fluoride Research, September 5–8, 2012; *Fluoride*, 45 (3 Pt 1) pp.183-184, July-September 2012, http://www.fluorideresearch.org/444/files/FJ2011_v44_n4_p183-187_sfs.pdf.

[97] Namavar Sara, "Fluoride removal from water by nanofilters", Abstract submitted for presentation at the XXXth Conference of the International Society for Fluoride Research, September 5–8, 2012; *Fluoride*, 45 (3 Pt 1) pp.187-188, July-September 2012, http://www.fluorideresearch.org/444/files/FJ2011_v44_n4_p183-187_sfs.pdf.

[98] Rezaee Reza, Mahvi Amir H., Maleki Afshin, Jafari Ali, Ashrafi Seyed Davoud & Safari Mehdi, "Application of modified wheat straw for fluoride reduction from aqueous solutions: isotherms and kinetics", Abstract submitted for presentation at the XXXth Conference of the International Society for Fluoride Research, September 5–8, 2012; *Fluoride*, 45 (3 Pt 1) p.195, July-September 2012, http://www.fluorideresearch.org/444/files/FJ2011_v44_n4_p183-187_sfs.pdf.

waste aluminum fillings[99], adsorption by granular ferric hydroxide[100], defluoridation by polyaluminum chloride[101], and by alum coagulant[102]

Mineral water bottlers are helping the populace escape fluoridation by inflating the levels of fluoride they write on the labels.[103] But the government knows this and subjects them to constant checks.

Of the 88 papers submitted for the 2012 international conference on fluoride 31 of them are from Iran. The subjects they discuss are very revealing: (1) measurements of fluoride in bottled mineral water, (2) simple de-fluoridation methods, and (3) measurements of naturally occurring fluoride in aquifers as well as artificially enhanced fluoride in city waters. Judging by the overwhelming dominance of Iranian scientific papers at the 2012 world conference, which is to be held in September in the city of Krakow, Poland, one can only conclude that water fluoridation is a national obsession and has the government's highest priority in Iran.

Iranian scientists invariably find the levels of fluoride in bottled water to be below the government dictated "ideal" level of 0.7–1.2 mg/L[104] and below the *"national permissible values"*.[105] One can be certain that once a manufacturer is found deficient in this respect, a squad of Iranian secret service agents will descend on the company and supervise the bottling process to ensure compliance. That is how the government ensures no one escapes the sterilizing effect of fluoridation.

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[99] Shams Mahmoud, Qasemi Mehdi, Mahvi Amir & Dobaradaran Sina, "Defluoridation of aqueous solutions with waste aluminum filings", Abstract submitted for presentation at the XXXth Conference of the International Society for Fluoride Research, September 5–8, 2012; *Fluoride*, 45 (3 Pt 1) p.197, July-September 2012, http://www.fluorideresearch.org/444/files/FJ2011_v44_n4_p183-187_sfs.pdf.

[100] Dehghani Mohamad & Younesian Masoud, Efficiency of granular ferric hydroxide (GFH) for fluoride removal from water, Abstract submitted for presentation at the XXXth Conference of the International Society for Fluoride Research, September 5–8, 2012; *Fluoride*, 45 (3 Pt 1) pp.197-8, July-September 2012, http://www.fluorideresearch.org/444/files/FJ2011_v44_n4_p183-187_sfs.pdf.

[101] Yousefi Zabihollah & Arefi Aboulghasem, Defluoridation of ground water by polyaluminum chloride (PAC), Abstract submitted for presentation at the XXXth Conference of the International Society for Fluoride Research, September 5–8, 2012; *Fluoride*, 45 (3 Pt 1) p. 213, July-September 2012, http://www.fluorideresearch.org/444/files/FJ2011_v44_n4_p183-187_sfs.pdf.

[102] Yousefi Zabihollah & Arefi Aboulghasem, "Fluoride removal from water by alum coagulant", Abstract submitted for presentation at the XXXth Conference of the International Society for Fluoride Research, September 5–8, 2012; *Fluoride*, 45 (3 Pt 1) p. 213, July-September 2012, http://www.fluorideresearch.org/444/files/FJ2011_v44_n4_p183-187_sfs.pdf.

[103] Fard Reza Fouladi, Daraii Hiua, Mirzaei Nezam, Ghaharamani Esmaeil, "Evaluation of fluoride Content in Sanandaj Bottled Water, Iran"; Abstract submitted for presentation at the XXXth Conference of the International Society for Fluoride Research, September 5–8, 2012; Szczecin, Poland; *Fluoride*, 45(3 Pt 1)151–218, July - September 2012, http://www.fluorideresearch.org/444/files/FJ2011_v44_n4_p183-187_sfs.pdf.

[104] Fard Reza Fouladi, Daraii Hiua, Mirzaei Nezam, Ghahramani Esmaeil & Jafari Ali, "Evaluation of fluoride content in Sanandaj bottled water, Iran", Abstract submitted for presentation at the XXXth Conference of the International Society for Fluoride Research, September 5–8, 2012; Szczecin, Poland, *Fluoride*, 45(3 Pt 1) p. 169, July - September 2012, http://www.fluorideresearch.org/444/files/FJ2011_v44_n4_p183-187_sfs.pdf.

[105] Yari Ahmad Reza, Saberi Bidgoli Mohammad & Mahvi Amir H., "Fluoride level in 18 brands of bottled drinking water available in Iran", Abstract submitted for presentation at the XXXth Conference of the International Society for Fluoride Research, September 5–8, 2012; Szczecin, Poland, *Fluoride*, 45(3 Pt 1) pp. 196-7, July - September 2012, http://www.fluorideresearch.org/444/files/FJ2011_v44_n4_p183-187_sfs.pdf.

As for children who have the misfortune of being born in these times and not be breastfed by their mothers, they are being eliminated from the procreation chain by baby formula that contains levels of fluoride three to four times above the WHO limit, which in itself ensures lowered fertility in adults let alone babies. A study done by Iranian scientists that is to be presented in September 2012 at the upcoming conference on fluoride in Poland has found the following:

> *"High concentration of Fluoride (F) in powder milk (formula-milk) can have adverse health effects on the body. The fluoride concentration of powder milk was analyzed in Iran in 2010. Twelve commercial brands of highly-consumed powder milk were selected to analyze fluoride content using a standard fluoride ionselective electrode (ISC). Three samples with different production dates from each brand were selected. The mean ±SD fluoride concentration in all the samples was 1.73±0.3 mg F/kg. The minimum and maximum F content in powder milk brands Humana2 and Humana3 were 1.32±0.1 and 2.36±0.3 mg F/g, respectively. The study revealed that there was no significant difference in fluoride concentration of the samples that belonged to various dates. Humana3 had high fluoride concentration (with an average of 2.36±0.3 mg F/g), which might be a risk factor for dental fluorosis, especially when mixed with water high in high F."*[106]

What is most interesting about their findings beyond the toxic concentrations of fluoride in baby formula is that all samples regardless of date contained the same high amounts of fluoride. This can only mean that the process by which fluoride ends up in baby formula is not accidental but controlled and intentional.

These desperate and draconian mass sterilization measures indicate that Iran is in a demographic conundrum and is trying to preempt a resource crisis. This emergency is exacerbated by Western imposed sanctions which, like all other sanctions ever imposed, are punishing the innocents and actually helping the leadership achieve its demographic goals. It most certainly will not stop Iran from building nuclear bombs.

The **United States** is attempting to get people to accept the fluoridation of bottled water and at least one brand, Dasani, has been introduced to the market recently. But since fluoride levels do not have to be indicated on the label, the government and its corporate allies in the sterilization program are free to add as much fluoride in bottled water as they wish and as is necessary to render the American people infertile.

[106] Ghanbarian Marjan, Mahvi Amir H & Ghanbarian Maryam, "Determination of Fluoride Concentration of Powder Milk in Iran 2010", Abstract submitted for presentation at the XXXth Conference of the International Society for Fluoride Research, September 5–8, 2012; Szczecin, Poland, *Fluoride*, 45(3 Pt 1) p. 166, July - September 2012, http://www.fluorideresearch.org/444/files/FJ2011_v44_n4_p183-187_sfs.pdf.

Despite an overload of fluoride through contaminated food and fluoridated tap water there is no respite from it even for the most vulnerable members of society, our children. In fact, children in North America are being targeted with fluoridated bottled water marketed specifically for them by "trusted" food giants such as Danone, which owns the Dannon water brand.

America is now in the transition from tap to bottle water as the primary source of drinking water. When the transition is complete – to date only 50% of Americans drink bottled water (Source: Green Nature) – then and only then will the government abandon its highly contentious policy of tap water fluoridation. At that point, the depopulation agenda will be pursued solely through fluoridated bottled water, soft drinks (and probably also milk and milk products) without the people's knowledge. This will pose few logistical problems, as the American bottled water market and bottling facilities are heavily consolidated among four corporate giants – Nestle, Danone, Pepsi-Co and Coca-Cola.

The huge increase in bottled water consumption is a new phenomenon that exploded from nearly 0% of the population drinking bottled water in 1990 to 50% by 2010. Most of that growth occurred between 1997 and 2008. Pepsi-Co Corporation began distribution of Aquafina in 1994. Coca-Cola responded with its own brand, Dasani, in 1999. Both of them followed the lead of their European counterparts, Nestle and Danone, who were already selling well-established mineral water brands such as Evian, Perrier and San Pellegrino mostly to upscale restaurants.

This astronomical growth can only be attributed to manipulation. The cost to achieve such a fundamental and rapid change in consumption pattern must have an underlying justification beyond the promise of future profits. It is my contention that the U.S., Canada and Mexico are setting the stage for abandoning the fluoridation of tap water and replacing it with fluoridated bottled water. They are doing this for two obvious reasons: one, getting consumers to pay for their medication with fluoride and, two, it has become too difficult for Canada and the U.S. to keep the policy of tap water fluoridation in place in the face of revolt from scientists working for the same government agencies responsible for forcing the fluoridation of municipal water on the people.

Governments are about to take advantage of the people's increasingly negative reaction to fluoridated tap water and their reluctance to drink it. In fact, there is no reason why Mexico should not have already switched. Mexicans are the highest per capita consumers of bottled water in the world at 243 Liters per person.

The U.S. is soon to follow Mexico. Studies indicate that the foreign-born minorities the US government is most interested in sterilizing through fluoridated tap water are drinking bottled water in higher percentages than the already sterilized Caucasian population.[107] Minorities and

[107] *Hispanics drinking more bottled water than any other demographic, marketers taking notice*, 12 August 2011, http://www.hispanicallyspeakingnews.com/notitas-de-noticias/details/hispanics-drinking-more-bottled-water-than-any-other-demographic-marketers-/9605/

especially Hispanics mistrust the quality of the municipal water and despite their lower incomes are drinking primarily bottled water, which they consider healthier and safer. This shows they are more intelligent and therefore more aware than the Caucasian population whose intellect has been obviously severely damaged after 60 years of drinking fluoridated water. The U.S. government, however, is about to close the people's freedom to choose between drinking clean or toxic water. America's depopulationists are taking notice of current research that shows *"African American and Latino parents are more likely to give their children mostly bottled water"* and that minority children are *"exclusively given bottled water 3 times more often than non-Latino white children.*"[108]

Soon all bottled water in the US will be like all tap water, fluoridated to cause sterility. The process has already started. In 2008, the Environmental Working Group (EWG) tested the quality of 10 major bottled water brands and found the same chemical contaminants as in tap water.[109] In 2009, the EWG did a survey of 188 bottled water brands and found that only two make public *"three basic facts about their products routinely disclosed by municipal water utilities: the water's source, purification methods, and chemical pollutants remaining after treatment."*[110] In 2010, the EWG repeated its survey and found "that 18% of bottled water brands still fail to reveal their water's geographic source; 32% are mum on treatment methods and purity testing; and 13% publish "water quality" reports that lack any actual testing results" in addition to which "*more than half of the 72 brands surveyed either made no improvements in transparency — or revealed even less in 2010 than in 2009.*"[111]

This apparent lack of oversight of the quality of bottled water is no accident but a deliberate legal loophole called the Federal Food, Drug and Cosmetics Act, which grants bottle water companies complete latitude as to what information they divulge to customers. Further protection is offered by the agency in charge of bottled water, the Food and Drug Administration (FDA), which should theoretically have stricter safety rules than the Environmental Protection Agency (EPA), which regulates municipal water utilities. The fact that it does not is highly suspect especially since the FDA explicitly designated fluoride in 1975 as "not generally recognized as safe" and does not allow it to be added to food or over-the-counter dietary supplements. The Department of Health and Human Services (DHHS), however, exempted fluoridated water from this ban so the depopulation agenda could proceed.

Repeated calls on Congress to impose strict labeling regulations that disclose the three basic facts described above and that would allow consumers to make informed decisions about what they

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[108] Marc H. Gorelick, Lindsay Gould, Mark Nimmer, Duke Wagner, Mary Heath,, Hiba Bashir & David C. Brousseau, Perceptions About Water and Increased Use of Bottled Water in Minority Children, *Archives of Pediatrics and Adolescent Medicine*, 2011:165(10): pp. 928-932, http://archpedi.jamanetwork.com/article.aspx?articleid=1107603.

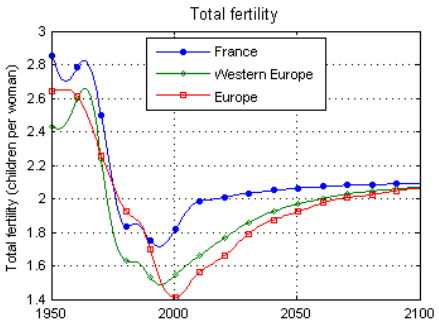
[109] Olga Naidenko, Nneka Leiba, Renee Sharp & Jane Houlihan, Bottled Water Quality Investigation: 10 Major Brands, 38 Pollutants, Environmental Working Group, http://www.ewg.org/reports/BottledWater/Bottled-Water-Quality-Investigation

[110] EWG's Bottled Water Scorecard Summary, Environmental Working Group 2008, http://www.ewg.org/health/report/BottledWater/Bottled-Water-Scorecard/Summary

[111] Nneka Leiba, Sean Gray & Jane Houlihan, EWG Survey 2010, http://www.ewg.org/bottled-water-2011-summary-findings.

drink have remained unheeded.[112] This too is not the result of negligence on the part of America's policymakers but a deliberate and calculated act meant to allow the depopulation agenda to be advanced on yet another front, bottled water.

Let us now look at the countries most likely to use fluoridate bottled water to achieve their depopulation goals. The best way to identify such countries is by looking at the pattern of consolidation of the bottled water market. To pursue mass sterilization through bottled water policymakers need the close and discreet collaboration of major industry players. The fewer the players for any given market the easier it is to gain access to the entire country through a handful of corporations that are willing to play along.




In 2001, the top three companies, Nestlé (which owned the Perrier, Vittel and Contrex brands), Danone (owners of Evian, Badoit and Volvic) and Neptune (owners of low-price brands like Cristaline and Saint-Yorre) controlled 63% of the volume of bottled water sold in **France**. In the 1970s, when France's total fertility rate experienced by far the greatest drop (going from 2.5 to 1.8), the consolidation was even stronger and the top four companies accounted for 80%-85% of sales. Interestingly, Saint-Yorre water, which is a low-price brand and reaches lower socio-economic groups, contains the highest fluoride levels of any other French mineral water at 9 ppm for Vichy Saint Yorre[113] and 8.5 ppm for Royale St. Yorre.[114] I remind the reader that at 2 ppm salmon are rendered infertile within days. That the cheapest product contains the highest fluoride content is part and parcel of the strategy to get as many consumers as possible to buy it and to also to reach the most disadvantaged segments of the populace, which the depopulation planners have always targeted for annihilation.

Eugenics aside, since France purportedly did not fluoridate its tap water, but experienced the steepest drop in fertility at a time when 85% of its bottled water industry was consolidated in the hands of only four companies, it is safe to infer that France achieved its demographic target through the use of fluoridate bottled water and that it did so without informing its citizens. Having reached its TFR target it then abandoned the strategy and introduced fluoridated salt, which now accounts for some 50% of the salt market; enough to keep the country's TFR in check.

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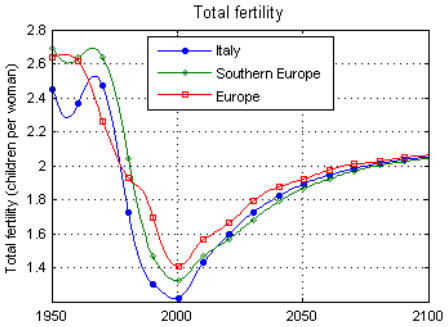
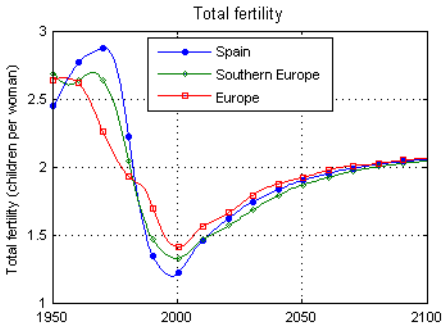
[112] Noah D. Hall, *"Federal and State Laws Regarding Bottled Water – An Overview and Recommendations for Reform"*, Testimony Before the United State House of Representatives Oversight and Government Reform Committee Domestic Policy Subcommittee Hearing on "Assessing the Environmental Risks of the Water Bottling Industry's Extraction of Groundwater", 12 December 2007, http://www.greatlakeslaw.org/blog/files/Noah_Hall_Bottled_Water_Testimony.pdf.

[113] Nicolay A, Bertocchio P, Bargas E, Coudore F, Al Chahin G, Reynier JP - "Hyperkalemia risks in hemodialysed patients consuming fluoride-rich water", Clinica Chimica Acta 281(1-2):29-36 (1999), http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=Abstract&list_uids=1021 7624

[114] Chevrel G, Barbey E, Meunier PJ - "Pharmacokinetics of fluorine contained in the Royale Saint-Yorre mineral water" Rev Rhum Ed Fr 60(11):802-7 (1993), http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=Abstract&list_uids=8054 927.

Number 2 in 2001 in terms of market consolidation was Italy with 60% of volume controlled by the top four companies, and number 3 was Spain with 42%. Undoubtedly, their market consolidation, like that of France, was greater in the sixties and seventies when they experienced the steepest falls in TFR.

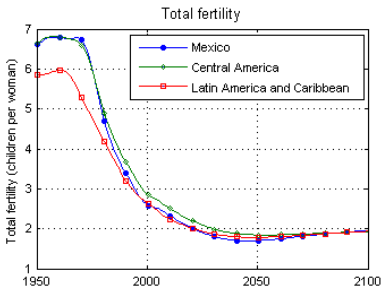



I have already identified Italy and Spain as users of bottled water for mass fluoridation. What the graphs above also reveal is that they both started their fluoridation campaign at the same time, Italy in c. 1968 and Spain in c. 1970.

France's TFR graph suggests that the idea of using fluoridated bottled water originated in France and that it was started there in c. 1962, though it did not gain full momentum until c. 1966. Thus, within four years of each other, France, Italy and Spain, who share close cultural ties, started their fluoridation campaign by using their culturally strong predilection towards mineral water.

**Mexico** provides the best example of how mass fluoridation can be accomplished through bottled water. As in previous examples, market consolidation is at an advanced stage in Mexico where four multinationals – Netsle, Danone, PepsiCo and Coca-Cola – dominate and account for at least 50% of total sales. The low quality of tap water in Mexico, due to bacteria, odor and sediment problems, has fuelled demand for bottled water and to date Mexicans are the largest per capita consumers of bottled water in the world at 243 liters per person per year. That was not the case twenty years ago.




The Mexican government most likely started fluoridating the municipal water of Mexico City during the 1968 Tlateloco unrest in an attempt to diffuse the revolutionary fervor of the student protestors. As such, the Mexican people have President Díaz (1964-1970) to thank for the beginning of their mass poisoning. Happy with the result, Díaz then expanded to the large cities across Mexico which is why the country's TFR took a nose dive starting in 1970 and collapsed from nearly 7 children per woman to 4.5 by 1980 and to just above 3 by 1990. By then the Mexican people lost trust in their tap water, especially since the 1990s brought several cholera outbreaks, and

started drinking bottled water en masse, the result of which a competitive bottled water industry developed. This is reflected statistically by a TFR curve that began to taper off in 1990, while at the same time the consumption of bottled water took off like a rocket, from nearly nothing in 1990 to 117 liters per person by 1999, then 179 liters by 2005 and 243 liters by 2010. Just as importantly, the volume of bottled water consumption was fuelled by the urban and rural populations alike. 70.5% of city folks in Mexico drank bottled water in 2005, according to the all-watchful eye of the WHO/UNICEF Joint Monitoring Programme, and 36.1% of their country folks.[115]

The Mexican government did what it always does when it cannot solve its own problems; it called on the US for help. This time they needed the US to engineer a market takeover with their large corporations that could be trusted with the fluoridation policy and that would break the back of the local bottlers and distributors in order to cut off the Mexican people's access to non-fluoridated water. American and European multinationals dutifully moved in on the 8000 Mexican water bottlers and distributors and in 15 years gained control of the Mexican market by buying up water concessions and cutting off local companies from new water sources.

During the six-year term of Vicente Fox (2000-2006), who was the former president of Coca-Cola in Mexico, the government approved 44 concessions for exploitation of Mexico's rivers and underground water resources. In 2008, the campaign intensified and "Coca Cola received 151 concessions to exploit aquifers, for a total extraction of 29.5 million cubic meters of water a year; Pepsi received 40 permits, for 7.9 million cubic meters; Danone was awarded 32 permits, for 4.8 million cubic meters; and Nestle received 21 contracts, for 5.2 million cubic meters."[116]

To ensure that the fluoridation campaign does not stall while switching from fluoridated tap to bottled water, the Mexican Ministry of Health implemented the National Program for Salt Fluoridation, without regard for areas that already suffer endemic and non-endemic dental fluorosis; a move that was described by Mexico's scientific community as *"paradoxical and controversial"*.[117] This was done right after the 1977 international meeting on salt fluoridation in Medellin, Colombia.

The Mexican people are currently under fluoride attack from all directions, tap water, bottled water, soft drinks and salt. High fluoride contents are measured in nearly everything scientists test, as a 2005 study looking at 197 tap water samples, 133 bottled water samples and 20

[115] WHO/UNICEF Joint Monitoring Programme for Water Supply and Sanitation. Estimates for the use of improved drinking-water sources, Mexico, March 2012, http://www.wssinfo.org/fileadmin/user_upload/resources/MEX_wat.pdf.

[116] Emilio Goday, *Mexico: Soaring bottled water use highlights mistrust of tap*, 29 September 2010, http://www.themadisontimes.com/news_details.php?news_id=449.

[117] Maupomé-Cervantes, G.; Jaramillo-Lanchero, R.D.; Andrade-Delgado, L.C.; Juárez-Reyes, P.L.; López-Pérez, R.; Sánchez-Navarro, W.; Sánchez-Pérez, L.; Vásquez-Obregón, V.H. Availability of fluoridated salt to the final consumer in Mexico City. *Boletín de la Oficina Sanitaria Panamericana* 1995, *119*, pp. 195-201.

fluoridated salt samples from Mexico City and Veracruz found.[118] The same team of researchers alerted the authorities two years earlier about over-fluoridation, but to no avail. They stated: *"When all sources of ingested fluoride were added and total fluoride intake was calculated, the children, both in Mexico City and Veracruz, were ingesting amounts of fluoride well above the upper limits of the proposed safe threshold for fluoride intake."*[119] In the ensuing time nothing has changed and a 2011 study looking at fluoride urinary excretion of school children in Mexico City and the fluoride concentrations in their home water, table salt, bottled water, bottled drinks, and toothpaste found that 60% of the 11- to 12-year-old children presented with dental fluorosis due to the systemic presence of fluoride in their environment.[120]

Most alarmingly, the fluoridation policy in Mexico, as elsewhere, has an ugly racial dimension when indigenous people are concerned, as in the central Mexico region of Los Altos de Jalisco, considered La Madre Patria (the Mother Country) of the Huichol and Nahuo people, and where the concentrations of fluoride in well and tap water was found to be toxically high throughout the region but especially so in four cities: Temacapulín (11.25 ppm - 12.97 ppm), Mexticacán-1 (6.64 ppm - 7.50 ppm), Lagos de Moreno (4.77 ppm - 4.96 ppm), Encarnación de Díaz (4.25 ppm - 4.40 ppm), and Tepatitlán-1 (1.83 ppm - 6.79 ppm). Researchers concluded that *"the population of these cities is under serious health risk and should be of a major concern"*.[121] To what extent the fluoride in their drinking water is naturally occurring or artificially added, only the government of Mexico knows. What is certain is that the authorities are not investing any money in de-fluoridation installations.

Of course, for the government of Mexico removing toxically high levels of fluoride from drinking water is not a concern, adding it is. This shows that all the fluoridation monitoring and measuring is not about preserving people's health, but about annihilating their reproductive systems so as to ensure that the nation's TFR curve continues to descend rapidly until it sinks well below the demographer's magic line of replacement level. And the easiest targets are always the natives, whose extermination continues unabated in the 21st century through scientific methods they could scarcely comprehend.

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[118] Martínez-Mier EA, Soto-Rojas AE, Buckley CM, Zero DT, Margineda J., Fluoride concentration of bottled water, tap water, and fluoridated salt from two communities in Mexico, *International Dentistry Journal*, 2005, April; 55(2) pp.93-9, http://www.ncbi.nlm.nih.gov/pubmed/15880964.

[119] Martinez-Mier EA, Soto-Rojas AE, Urena-Cirett JL, Stookey GK, Dunipace AJ, Fluoride intake from foods, beverages and dentifrice by children in Mexico, Community Dent Oral Epidemiology, 31(3):pp. 221-30 (2003), http://www.ncbi.nlm.nih.gov/pubmed/12752549.

[120] María Dolores Jiménez-Farfán, Juan Carlos Hernández-Guerrero, Lilia Adriana Juárez-López, Luis Fernando Jacinto-Alemán & Javier de la Fuente-Hernández, Fluoride Consumption and Its Impact on Oral Health, *International Journal of Environmental Research and Public Health*, 2011, *8*, pp. 148-160, www.mdpi.com/1660-4601/8/1/148/pdf.

[121] Hurtado R., Gardea-Torresdey J. & Tiemann K. J., *Fluoride occurrence in tap water at "Los Altos de Jalisco" in the central Mexico region*, Proceedings of the 2000 Conference on Hazardous Waste Research, http://www.engg.ksu.edu/HSRC/00Proceed/gardea_torredey1.pdf.

Many other countries have either implemented or are in the process of implementing national programs of fluoridated bottled water to fulfill their demographic ambitions. The Middle East in general and the Arabian Peninsula in particular are focal points for such efforts, but it is beyond the scope of this book to discuss each and every country. Suffice it to say that the countries with the highest consumption of bottled water in the region – the United Arab Emirates (153 liters per person), Lebanon (212 L), Qatar (95 L), and Saudi Arabia (5 L) – are most certainly prime candidates for fluoridation via bottled water and are worth investigating.

A last aspect that merits attention is the use of plastic bottles as opposed to glass. This transition from glass to plastic occurred almost overnight in the year 2000 and there is every indication to believe that it was motivated by the same eugenic considerations. The concern comes from bisphenol A (BPA), the compound used in the manufacture of polycarbonate plastics and epoxy resins, the materials plastic bottles are made of and metal cans are lined with. BPA is known to be an endocrine disruptor which mimics the body's own hormones[122] and that even in low dose administration causes a wide spectrum of developmental and reproductive ill-effects, such as changes in mammary gland development and a decrease in testosterone levels and sperm production.[123] It has also been clearly linked to cancer, obesity and diabetes[124], conditions that have exploded in the last ten years in the countries that have the highest consumption of bottled water and soft drinks from plastic bottles.

Scientific studies showing the destructive effects of BPA on human health have prompted a review of the human safety levels[125] especially since BPA was found to be present in 96% of American pregnant women.[126] A study has also shown that drinking water and other beverages from plastic bottles made with BPA increased its presence in the urinary levels of pregnant women by nearly 70 %.[127] This has prompted research into the possibility that BPA leeches from bottles made from BPA-containing plastics, such as PET (polyethylene terephthalate) and

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[122] Elobeid M., Allison D. *Putative environmental-endocrine disruptors and obesity: A Review*. Curr Opin Endocrinol Diabetes Obes 2008; 15(5): pp.403–408, http://www.ncbi.nlm.nih.gov/pubmed/18769210.

[123] O'Connor J.C., Chapin R.E., *Critical evaluation of observed adverse effects of endocrine active substances on reproduction and development, the immune system, and the nervous system*. Pure Appl. Chem 2003; 75 (11): pp.2099–2123, http://pac.iupac.org/publications/pac/pdf/2003/pdf/7511x2099.pdf.

[124] Vom-Saal F.S., Myers J.P., *Bisphenol A and risk of metabolic disorders.* JAMA 2008; 300(11):pp.1353–1355, http://jama.jamanetwork.com/article.aspx?articleid=182555.

[125] *Beronius A,, Rudén C,, Håkansson H,, Hanberg A., Risk to all or none? - A comparative analysis of controversies in the health risk assessment of bisphenol A. Reprod Toxicol 2009; 29(2) pp.132–146,* http://www.ulbruxelles.be/facs/sciences/biol/biol/Beronius.pdf.

[126] Woodruff T.J., Zota A.R., Schwartz J.M., *Environmental chemicals in pregnant women in the United States: NHANES 2003–2004.* Environ Health Perspect 2011; 119(6): pp.878-885, http://ehp03.niehs.nih.gov/article/info%3Adoi%2F10.1289%2Fehp.1002727.

[127] Braun A., Kalkbrenner A.E., Calafat M.A., Bernert J.T., Ye X., Silva M. J., Barr D.B., Sathyanarayana S, Lanphear PB. Variability and predictors of urinary bisphenol A concentrations during pregnancy. Environ Health Perspect 2011;119(1): pp.131-137, http://ehp03.niehs.nih.gov/article/info%3Adoi%2F10.1289%2Fehp.1002366.

polyethylene (PE) bottles[128], into the water under poor storage conditions such as high temperature and sun radiation. Study after study has confirmed that this is indeed the case and as a result:

> *"Bisphenol A is listed as a possible priority substance subject to review for identification in the field of water policy. The ester bonds in BPA-based polymers are subject to hydrolysis and, therefore, BPA leaches into food and drinks from their storage containers. Heat and/or acids speed up the leaching process, and repeated washing of polycarbonate products have all been shown to result in an increase in the rate of leaching of BPA."*[129]

As expected, health authorities have yet to ban BPA-containing plastics from use in the beverage and canning industries. BPA is protected with the same stubbornness as fluoride for the same reason; its usefulness in undermining our reproductive systems. BPA, however, has the added advantage that it also shortens life by disrupting our metabolism and endocrine system and this is invaluable for governments with ambitious demographic targets, as they can thin our numbers from two directions, the beginning and the end of life.

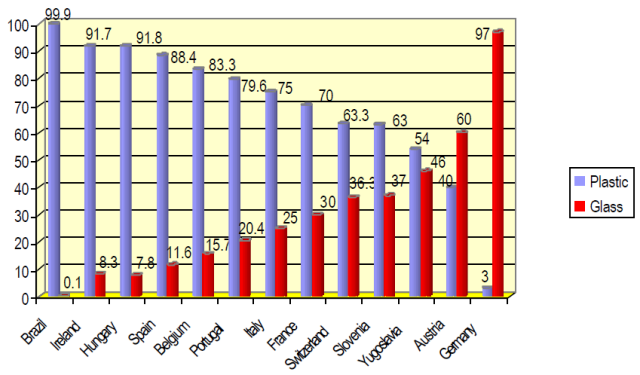


**Figure 1: Types of packaging used for bottled water, in percentage, in 1999, (Source: UNESEM, 2000)**

That authorities are well-aware of BPA's sterilizing effects is easily inferred from statistics on its use across the world. The adjacent graph shows that Germany, which is where BPA was invented and that is the largest exporter of plastics made from BPA refuses to use it for its own population and uses glass instead. By contrast, the countries with the most active depopulation agendas, Brazil and Ireland, use almost exclusively plastic bottles. In the United States and Canada it is almost impossible to find any beverages that come in glass and consumers are forced to drink our of plastic bottles whether they like it or not.

By forcing people to drink from BPA-leeching plastic bottles, the eugenicists ensure that no drinking water source remains uncontaminated. Regardless how good the quality of the water is when manufacturers put it in plastic bottles, and whether it is artesian, filtered, sparkling or well water, by the time it reaches the consumers it will be contaminated with infertility-causing BPA.

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[128] Zhan M, Yang X, Xian Q, Kong L. Photosensitized degradation of bisphenol A involving reactive oxygen species in the presence of humic substances. Chemosphere 2006; 3: 378–386, http://www.ncbi.nlm.nih.gov/pubmed/16289215.

[129] Mai A. Elobeid, Zainab M. Almarhoon, Promy Virk, Zeinab K. Hassan, Sawsan A. Omer, Maha El Amin, Maha H. Daghestani and Ebtisam M. Al Olayan, "Bisphenol A Detection in Various Brands of Drinking Bottled Water in Riyadh, Saudi Arabia Using Gas Chromatography/Mass Spectrometer", *Tropical Journal of Pharmaceutical Research*, June 2012; 13 (3): pp.455-459, http://www.tjpr.org/vol11_no3/2012_11_3_15.pdf.

Authorities in countries with populations that are reluctant to give up their glass bottles for plastic bottles are doing their utmost to design and implement legislation that forces bottlers to gradually switch to plastic. The deceitfulness of such legislation is truly beyond words. This is what happened in Austria:

> *"Until 1994 a de facto glass bottle commandment existed in Austria, based on hygiene regulations from the year 1935. According to a decision by the Austrian Court of Justice based on the mineral water regulation of 1994 and the EU mineral water directive, "all containers for filling natural mineral water may be accepted by the authorities as long as it can be proven, that the containers do not change the microbiological and chemical features of natural mineral waters". Since then, it has been possible to fill mineral water into plastic bottles."* (p.3)

By placing the onus of proving the safety of plastic bottles on consumers, the Austrian government pried the door open for PET plastic use instead of glass for mineral water. To displace glass with plastic from use in milk containers they used a different legal strategy:

> *"Based on the Austrian waste law, in 1992, the Austrian packaging ordinance was published. This ordinance (Zielverordnung-Verpackungsabfälle Nr. 646/§2) determines the shares which are to be achieved from reuse and non-polluting utilisation of beverage packaging, as refers to domestic consumption.*
>
> *Recovery, according to the Austrian waste law, is defined as: reuse plus material recycling plus thermal utilisation. In respect to beverage packaging, it was 81% in 1994. From that amount, the reuse share is about 64%, while recycling and incineration of one-way beverage packaging accounted for 17%. In 1993 the recovery rate was only 74%. The considerable increase of 7% from 1993 to 1994 can mainly be contributed to the recovery of one-way beverage packaging (in particular, plastic bottles and beverages cartons). For the first time since 1990/1991 the shares for reuse were not increased in 1994."*[130] (p4)

In other words, instead or reusing glass bottles, as the Austrians had been doing since 1935 and which is the most environmentally friendly practice, the government designed legislation to view the recycling of plastic bottles as a form of reuse. As a result, since 1994, even milk and fruit yoghurt has been filled in reusable polycarbonate bottles. No wonder the use of glass bottles declined in Austria from nearly 100% in 1990 to just 60% by 2000, as the graph on the previous page shows.

Without legislation specifically designed to force people to drink from plastic bottles we would still be drinking from glass, which is infinitely better for our health and does not adulterate the taste of the beverage. This is to be concluded from the fact that plastic bottles have existed since the end of the 1960s, when they were made of PVC (vinyl polychlorure), and that PET

[130] Report Austria: A Description of the Status Quo for Reuse Packaging, http://ec.europa.eu/environment/waste/studies/packaging/reuse_country_reports.pdf.

(polyethylene terephtalate) bottles were invented in the 1980s, but neither one nor the other type of plastic was embraced by industry or consumers until governments designed legislation to ensure the wide use of plastic and the disappearance of glass bottles. Since such legislation clearly violates even the most basic environmental logic – which is why our landfills are full of plastic bottles – we can only conclude that governments had higher objectives in mind than preventing pollution when they engineered the universal use of plastic bottles for drinking water. Their motivation is and always was to render us sterile by forcing us to drink water poisoned with fluoride and/or endocrine disrupting BPA. By adding BPA to their sterilization arsenal governments have been able to half the concentration of fluoride in bottled water and make up the lost half with BPA. This allows governments and their dishonest researchers to assert that the levels of fluoride they find in bottled water are below what is needed for healthy teeth and well within safe limits and thus weaken the anti-fluoridation lobby.

In light of all of the above, we can conclude that the shift from drinking tap water to drinking bottled water that has occurred in the 1970s in Europe was used and is still being used by select European countries to achieve their demographic goals. We can also conclude that the more recent shift from drinking water and other beverages from plastic rather than glass bottles, which took place in the late 1990s and early 2000 was a strategic move by the eugenic lobby to allow late comers to the depopulation agenda to catch up and to achieve infertility targets that are far more ambitious than those set at the end of World War II. This is made possible by the ingestion of two rather than just one infertility-causing drugs, fluoride and BPA. The use of BPA is also to be understood as a means by which to shorten lives and not just prevent new lives from being born.

**INDICATOR 9**

Countries that refuse or are unable to impose fluoridated water (be it tap or bottled) or fluoridated salt in measures large enough to satisfy demographers, or who need to change tactics in order to confuse and confound civil society and the anti-fluoridation campaigners, are using the third alternative of mass fluoridation, milk. In the words of the Borrow Foundation, the main promoter of milk fluoridation on behalf of the World Health Organization and British eugenicists,

> *"In view of the resistance in many parts of the country to the artificial fluoridation of drinking water, it has been suggested that fluoride for the reduction of dental decay could be supplied to children by means of beverages provided at school ..."*

As with salt fluoridation, which was invented by a Swiss gynecologist in 1950, milk fluoridation too originated with a Swiss doctor, a paediatrician by the name of E. Ziegler, an obscure figure who in 1952 proposed fluoridated milk as a possible dental caries prevention medium and soon published on the subject.[131] Clearly, the sudden interest of Swiss doctors in fluoride was prompted by the World Health Organization, which was established in 1948 and headquartered in Geneva, Switzerland, and who was in need of medical justification for ongoing and future mass fluoridation programs. Swiss universities and doctors came to the rescue and the alliance between the world's politicians, UN and WHO bureaucrats and scientists came into being and has been carefully and generously nurtured with massive amounts of public and private money ever since.

Dr. Ziegler's paper was immediately followed by a large study in the city of Winterthur, Switzerland, where innocent children were subjected to experimental amounts of fluoridated milk from 1958 to 1964. To lend milk fluoridation an international cache, the depopulation lobby funded early research with fluoridated milk in Japan (1959), U.S. (1962) and Colombia (1964-1972).

The fluoridating agent was changed (calcium fluoride, sodium fluoride, disodium monofluorophosphate, and disodium silicofluoride) as well as concentrations (anywhere from 0.2% to 2.2%) and types of milk (pasteurized, sterilized, UHT or powder) to see what imbeds best in children's teeth and to what extent it shows in urine, as these are indicative not only of caries reductions but also and most importantly of fertility destruction. All these phony efforts would also serve to give the impression that serious research was being conducted with the children's dental health and well-being in mind.

Since then, children have been experimented on with fluoridated milk across the world, with the earliest research studies serving as fronts for large-scale fluoridation projects in Bulgaria,

[131] E. Ziegler, Untersuchung über die Fluoridierung der Milch zur Kariesprophylaxe. Mit. Naturwiss. Des Winterthur H, 28:pp. l-9, 1956.

Hungary and Chile. Later studies have been quietly conducted throughout the world, but especially in South America and most recently in the Middle East.

By the early 1980s, the WHO had amassed sufficient "scientific evidence" to promote its new mass fluoridation vehicle to willing governments. The EU did its part by giving milk fluoridation its full and unmitigated support.

Without much fanfare, the German journal *Neue Gesundheit* reported in 1984 the following policy development:

> *"The use of fluoridated milk as a measure for tooth preservation in children recently got a large support from the European Community. The suitability of fluoridated milk for children of school age has now been officially recognized, and according to a decision of the European Community the delivery to the 50 million children in the ten member states is to be sponsored by official subsidies. The research projects that led to the drastic change of attitude of the European Community were financed by the Borrow Dental Milk Foundation, a welfare organization founded by Dr. Edgar W. Borrow, a retired dairy cattle breeder, and having its seat near Portsmouth in England. According to Dr. Borrow´s conviction, the European Community decision will give milk a new image ..."*[132]

Despite this early announcement there are no official figures about the use of fluoridated milk in the European Union to this day. Poisoning kindergarten and elementary school children is not exactly a project the EU wishes to boast about.

The only overt programs of milk fluoridation are those advertised by the Borrow Foundation in Bulgaria, Chile, Republic of Macedonia, Russian Federation, Thailand, and the United Kingdom. Other countries run their own show with discreet and minimal technical assistance from the WHO, primarily Columbia, China and a few undisclosed Arab nations.

As milk fluoridation mostly targets the child population, milk fluoridation schemes have been established within the context of school health programmes and programmes purportedly intended for healthy diet and nutrition.[133]

I have already discussed **Chile**'s National Complementary Feeding Programme (PNAC), which has been running for over 50 years and provides powdered milk for mothers during pregnancy and lactation and powdered milk and milk derivatives for children up to 2 years of age to 90% of the population[134], all of which is of course laced with fluoride for the past 40 years. The public façade of PNAC is that it aims to promote breast-feeding by providing supplements to mothers

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[132] Neue Gesundheit, No. 12, 1984, p. 26, quoted by Peter Meiers, http://www.fluoride-history.de.

[133] WHO (2003), *Oral health promotion: an essential element of a health-promoting school.* WHO information series on school health, document eleven. Geneva: World Health Organization, http://www.who.int/oral_health/publications/doc11/en/.

[134] Mariño R, Villa A, Guerrero S (2001). A community trial of fluoridated powdered milk in Chile. *Community Dentistry and Oral Epidemiology*, 29: 435-442, http://www.ncbi.nlm.nih.gov/pubmed/11784286.

during pregnancy and lactation.[135] What I have not yet discussed is a new nation-wide program that augments PNAC and is implemented under a national nutrition initiative operated by the Junta Nacional de Auxilio Escolar y Becas (JUNAEB), providing breakfast, including milk, free of charge for children attending rural schools. According to the Borrow Foundation, JUNAEB's programme encompasses 3,600 schools and 237,000 children aged 6-14.[136]

Along with this public largesse, comes of course private infertility once these children make it to adulthood, if they make it at all. What the Chilean government gives in subsidized food and milk to children today, it takes back ten-fold in future social costs that it will not have to pay out to the offspring of a generation who will grow to be mostly infertile. And since the majority of the rural population also happens to be indigenous, the Chilean government shoots two birds with one stone, demographic stability and ethnic cleansing, the latter of which will empty the countryside of indigenous people and free it for corporate use that will benefit the ruling class of parasites who have been sucking the blood of the people since their European forefathers arrived on the scene.

Statistics tell the following story of gruesome extermination. In 1570, Chile was inhabited by some 10,000 Spanish settlers, 10,000 mestizos and 600,000 indigenous people. In the 1992 Census, the indigenous population had dwindled to just 10.5% of the total population. In 2002, according to the Chilean Census, only 4.6% of the population (692,192 people) declared themselves indigenous and belonging to one of eight recognized ethnic groups in the current legislation.

In other words, over the past five centuries the invading Europeans have grown in numbers from 10,000 to 16 million while the native population stayed the same at around 600,000. Contrary to popular belief, the most intense eradication of indigenes did not occur when the conquistadors were running wild across the country hacking down every native who refused to submit to their plunder. It occurred in the last thirty years when the eradication methods were perfected with the use of fluoride that made its way into the unsuspecting natives as the gift of free milk and food offered with a smile every morning at school to defenseless and innocent children who will never have children of their own. That is why in only ten years, from 1992 to 2002, the indigenous population has been halved from 9.7% of the total to 4.6%. I do not have the results of the 1982 census, but I suspect at that time the natives represented at least 15% of the total population. If

[135] Uauy R, Kain J (2002). The epidemiological transition: need to incorporate obesity prevention into nutrition programmes. *Public Health Nutrition*, 5: 223-229, http://www.ncbi.nlm.nih.gov/pubmed/12027288.

[136] Borrow Foundation website, http://www.borrowfoundation.org/community-programme/programme-details#Bulgaria.

the fluoridation program is allowed to continue – be it as milk, salt or water – there will be no natives left in Chile by 2020. The next to go will be the mestizos, followed closely by undesirable, low socio-economic segments regardless of the purity of their blood or lack thereof. In the end, the pure blooded European descendants will remain as masters and only inhabitants of a land that once belonged to indigenous people and they will have accomplished this with milk; milk and fluoride, that is, not milk and honey.

Despite the rapid decline of Chile's indigenous population, in the eyes of the ruling elite they are not dying fast enough and efforts to reclaim their ancestral lands as well as their resistance to new evictions from the lands they currently occupy have angered the elites who have unleashed a new wave of repression on the Mapuche who are native to the south of Chile. The Chilean police have shot several Mapuche children in 2012 alone and petitioners to the Inter-American Commission on Human Rights (IACHR) have documented 130 incidents of police brutality and human rights violations against Mapuche children. The state has also arrested and prosecuted Mapuche children under the Antiterrorist Law in order to justify the children's abuse and detention.[137] Nevertheless, the Chilean government continues to show extraordinary concern for the teeth of the Mapuche children, who are being showered with free fluoridated milk, while behind closed doors it orders the police to brutalize them on sight. Who in their right mind could possibly believe that Chile's free milk program is anything but a means of exterminating the country's undesirables?

**Bulgaria** has apparently abandoned its milk fluoridation program due to *"problems with the milk supply arising from major changes within the dairy industry, and other adverse factors"*.[138] In other words, Bulgaria's politicians got cold feet or could no longer live with the burden of their consciences and pulled back before parents found out that they were poisoning their children. Bulgaria's program started in 1988 and reached 15,000 children. While the program ran, the children received 200 ml of milk containing 5 ppm F as sodium fluoride; just enough to devastate their little bodies and turn them into genetic dead ends.

In the **Republic of Macedonia**, the Ministry of Health introduced a milk fluoridation programme in 2009 as part of a national strategy for the "prevention of oral disease" in children up to 14 years old. The programme ceased in 2011, purportedly due to the decentralization of funding from the federal to the municipal level, but is soon to resume. While it ran, 5,843 children aged 3 to 5 years received 200 ml of fluoridated milk every school day.

[137] Jennifer Koduru, *Situation of the Mapuche Children in Chile*, http://hrbrief.org/2011/03/situation-of-mapuche-children-in-chile/.
[138] Borrow Foundation website, http://www.borrowfoundation.org/community-programme/programme-details#Bulgaria.

The **Russian Federation** was bound to use poisoned milk on one of its Muslim republics. The unfortunate winner of the Russian government's generosity is the Republic of Tatarstan whose citizens are Sunni Muslims and where 35,000 kindergarten children aged 3 to 6 from the cities of Niznekamsk and Zelenodolsk are provided with fluoridated pasteurized milk since 1994. The scheme is soon to expand to other cities, including Kazan, the capital. Before long the Muslims of Tatarstan will have dwindled in numbers if their children continue to drink the state's free but poisoned milk.

Russia runs other milk schemes on children aged 3 to 7 in the cities of Voronezh, Maikop and Smolensk. These cities are not random choices either, but deliberate targets. Maikop is home to the Circassian ethnic minority that has been on the receiving end of Russia's wrath since 1860 when Russian Cossacks murdered one million Circassians in one of its history's largest genocides. The remaining Circassians were dispersed. Like the people of Tatarstan the Circassians are also fiercely independent Sunni Muslims and the Russian leadership is hell bent on suppressing Islam across the country. What better way to do it then by driving them to extinction through the free distribution of F-milk!

As for the cities of Voronezh and Smolensk, I suspect Moscow is targeting their large Old Believers populations, who are bitterly hated by the leadership of the Russian Orthodox Church, with whom the resurgent Old Believers are embroiled in many property disputes, and who tend to have very large families. The milk fluoridation program will ensure that neither Voronezh nor Smolensk will be Old Believers strongholds twenty years from now, as their faith is no match to the sterilizing power of fluoride.

**Thailand** launched its milk fluoridation project in 2000 under the direction of the Department of Health and has expanded its ambit rapidly to include 800,000 children across the country and in virtually every province. In the capital city of Bangkok alone the number of children involved is 338,000 under a scheme operated by the Bangkok Metropolitan Association. As in Chile, the poisoned milk is provided free of charge through a national school program that reaches into every corner of the country and that has been recently extended even to private schools.

The Royal family does all it can to undermine their subjects' reproductive health and has dedicated its centre for agricultural research and development, called the Royal Chitradala Projects (RCP), which is conveniently housed on the grounds of the Chitradala Palace in

Bangkok and founded by His Royal Highness King Bhumibol Adulyadej, to supply poisoned milk to children throughout the capital.

The large quantities of fluoridated milk needed are met by an expanding national program, fourteen dairies have so far acquired the expertise and equipment necessary and more are being trained and controlled by the RCP. The programme is in other words driven from the very heart of the country's power structure, the royal house, where secrets are well kept as they must due to the sensitive nature of the poisoned milk scheme and its potential to explode into outright bloody revolt. If the Thai people find out what their revered king is doing to their children, it will not be long before his head is rolling in the gutter.

The expertise the king's centre has acquired is also pandered for export to places as far afield as Mongolia, a country that has asked Thailand for assistance in setting up its own milk fluoridation scheme. The steppes of Mongolia, it appears, have become too crowded for the country's elite who, like every other national elite around the world, is looking for an easy way to thin the ranks of their people.

What immediately draws attention and suspicion about Thailand's milk fluoridation program is the milk itself. Few Asian cultures and diets use milk fat in their cuisine and Thailand is no exception.[139] Furthermore, many Asians, and Thais again are no exception, suffer from lactose intolerance.[140] Not surprisingly, Thailand did not have a dairy industry to supply the milk needed by the program and the industry had to be created by the government, which is exactly what happened through direct subsidies to farmers to encourage them to switch from raising crops to raising cows and through secure milk purchases by the government to create the necessary market demand.

The government began promoting milk drinking for health at its Seventh National Economic and Social Development Plan (1992-1996) and allocated 278.6 million baht to the Ministry of Education for a school milk programme to provide milk free of cost to pre-primary school children and later to primary school children. By 2008, the government's generosity had grown to 7 million baht to provide 200 cc of milk per day to more than 6 million school children over the course of 230 days a year. The government sets the school milk price and provides 5 baht per student per day.[141]

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[139] F. Dong, "The Outlook for Asian Dairy Markets: The Role of Demographics, Income, and Prices." CARD Working Paper, 05-WP 399, 2005, http://www.card.iastate.edu/publications/DBS/PDFFiles/05wp399.pdf .

[140] Schluep Campo, I. & J.C. Beghin (2005). "Dairy Food Consumption, Production and Policy in Japan." CARD Working Paper, 05-WP 401, Center for Agricultural and Rural Development, Iowa State University. http://www.card.iastate.edu/publications/DBS/PDFFiles/05wp401.pdf.

[141] Pensri Chungsiriwat & Vipawan Panapol, Thailand: An Industry shaped by Government Support, Department of Livestock Development, Ministry of Agriculture, Bangkok, http://www.fao.org/docrep/011/i0588e/I0588E10.htm.

Having created a milk consumption habit among the younger generations, where previously there was none, the Thai government could start its milk fluoridation campaign. This new dietary habit has been imposed on Thai children not out of concern for their nutrition but by the necessity to get them to ingest enough fluoride to render their reproductive systems dysfunctional. In 2000, the milk fluoridation program began and with it the domestic milk consumption exploded. Between 1989 and 2002 it grew by 418%. It was only when the milk fluoridation campaign started that the milk consumption exploded, not before, which means that all that previous funding was offered to set the stage for fluoridated milk consumption and its public subsidy. The Thai government, like any other government, gives nothing for free.

| Market Year | Domestic Consumption | Unit of Measure | Growth Rate |
|---|---|---|---|
| 1987 | 70 | (1000 MT) | NA |
| 1988 | 87 | (1000 MT) | 24.29 % |
| 1989 | 108 | (1000 MT) | 24.14 % |
| 2002 | 560 | (1000 MT) | 418.52 % |
| 2003 | 708 | (1000 MT) | 26.43 % |
| 2004 | 795 | (1000 MT) | 12.29 % |
| 2005 | 860 | (1000 MT) | 8.18 % |

Thai dairy milk consumption. Source: United States Department of Agriculture

Its largesse is merely a front for its secret campaign to sterilize the population. Fluoridated milk is being poured down the throats of innocent Thai children for no other purpose than to ensure that they cannot have children of their own when they reach adulthood.

Big industry is responsible for processing the milk and injecting it with fluoride. Farmers and cooperatives sell their milk to the big processing plants owned by CP-Meiji, Foremost, Thai Dairy Industry, Nestlé and DPO. Only big industry and experienced players like Nestle can be trusted with the odious task of poisoning children. And big business is working hard to fulfill its part of the bargain. In 2004, 'A Milk for All' campaign was launched in Thailand to encourage milk consumption. *"Nestlé Thailand, Foremost and Dutch Mill are among the companies involved in this ambitious project, which eventually aims to hike average annual per capita consumption"* from 10.4 Kg to 73-91 Kg.[142]

[142] THAILAND: Nestlé, Foremost campaign to increase milk consumption; http://www.just-food.com/news/nestl%C3%A9-foremost-campaign-to-increase-milk-consumption_id80309.aspx.

Statistic show that per capita milk consumption in Thailand was a low of 2 litres per person per year in 1984, but has risen to 23 litres in 2002 thanks to the School Milk programme which accounts for more than 30% of the total liquid milk market. *"As a result school milk days have been expanded from the 200 days school calendar to 230 feeding days, with an extra 30 days of milk for consumption in the holidays. Milk is distributed in long life (UHT) packs for parents to pick up from schools."*[143] The government would not want the children's bodies to recover from chronic poisoning during the holidays.

And this is only the beginning. The potential for fluoridated milk will not be fully exploited until soy milk is also injected with fluoride, which is what Asians like to drink best and what eugenicists are gearing up for. But that will not happen until the young generations that are currently being conditioned to drink fluoridate milk reach adulthood. At that point in time soy milk too will be openly fluoridated, if it isn't already secretly fluoridated.

**China** has eschewed the American method of sterilizing its population by fluoridated water, though it did use it for a period of time in the southern province of Guangzhou, where the populace speaks Cantonese and did not use it in the north where the people who control the Chinese government and who speak Mandarin are from and live. China has however embraced the Anglo/Swiss method of fluoridated milk. China has been under pressure from UN agencies and the international community to add fluoridation to its population control arsenal, as China's cooption is the only way to safeguard against political blackmail by threatening to let the cat out of the bag, so to say. The international community has reciprocated China's collaboration by abstaining from criticising its one-child policy and by providing all the necessary funding, equipment, experts and knowhow for a nation-wide milk fluoridation programme, which is indeed in the making. The WHO is already drooling at the mouth:

> *"Approximately one fifth of the world's children live in China. The central government has recognised the need to improve the nutrition of children, and a national school milk programme was implemented in 2000, covering 20 provinces, municipalities and autonomous regions.*
>
> *This followed the approval by the State Council of China in 1997 of a National Action Plan for Nutrition and a successful trial, involving 2000 schools in five cities, which began in 1999. In the words of Zhang Baowen, Vice-Minister of the State Ministry of Agriculture, "China has more than 200 million school students, and comprehensive implementation of its school milk programme is of far-reaching importance."*[144]

Anticipating an astronomical increase in the amount of milk needed to satisfy future demand for milk in China, the World Trade Organization is working hard to liberalize the market for dairy

[143] Issara Suwanabol, School Milk Programme in Thailand, http://www.fao.org/es/ESC/common/ecg/188/en/School_Milk_Programme_in_Thailand.pdf.
[144] J. Bánóczy, P.E. Petersen, A.J. Rugg-Gunn (Eds.), *Milk fluoridation for the prevention of dental caries*, World Health Organization, Geneva, 2009, http://www.who.int/oral_health/publications/milk_fluoridation_2009_en.pdf.

products and to lift all existing import and export barriers and tariffs.[145] The eugenicists know that without trade liberalization to allow large exports from milk producing countries in Europe, South America and North America, Asia will be unable to meet the growing demand as it lacks pasture land to increase the number of milk producing cattle. Supplying milk to an additional 200 million Chinese school children on a daily basis will place impossible demands on China's cattle stocks.

The Chinese government aggressively promotes its dairy industry to purportedly meet the rapidly changing dietary habits of its urban population and to improve the health of the people.[146] In reality, its primary motivation is to ensure that the milk fluoridation/depopulation program does not depend on milk imports and on foreigners. Its success so far is limited and the doubling of its production between 1997 and 2002 has not been enough to ensure China's milk independence, which is why it still has to import milk.[147]

The dairy consumption in China now averages only 4.5 Kg per person per year compared to 105 Kg in the EU, 113 Kg in the US and 120 Kg in Australia.[148] The potential for growth is therefore extraordinary and promises rich rewards for the milk exporters in addition to fantastic results for the depopulation planners.

While the U.S. has cornered the water fluoridation market and Switzerland the fluoridated salt, the **United Kingdom** has carved its niche in the depopulation effort with the fluoridation of milk ever since Edgar Wilfred Borrow patented a device to inject just the right amount of fluoride into milk. The triad of the fluoridation agenda by method of delivery is therefore composed of the US, Switzerland and the UK.

Naturally, the UK could not sell milk fluoridation unless it can reassure its foreign buyers that it is safe. And they could not make a convincing argument about its safety unless they are sufficiently confident to use it on British children. The Brits tested it first on Scottish children in Glasgow in 1976 and later in 1984.[149] No surprise there, the 1976 study, which lasted until 1981, was done on children 4 to 6 years old from four schools in a low social class area.[150] Despite questionable results other studies followed also on children from poor families.

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[145] John C. Beghin, Dairy Markets in Asia: An Overview of Recent Findings and Implications, Center for Agricultural and Rural Development Iowa State University, Briefing Paper 05-BP 47, September 2005, http://ageconsearch.umn.edu/bitstream/18303/1/bp050047.pdf.

[146] Zhou ZY, Tian WM, Zhou JL (2002), The emerging dairy economy in China: production, consumption and trade prospects. *Agribusiness Review* 10: pp.1-14, http://www.agrifood.info/review/2002/Zhou.html.

[147] Fuller F, Beghin JC (2004), *China's growing market for dairy products*, Iowa Agricultural Review, Centre for Agriculture and Rural Development, summer 2004, p. 10-11, http://www.card.iastate.edu/iowa_ag_review/summer_04/article5.aspx.

[148] Tingjun Peng & Thomas L. Cox, An Economic Analysis of the Impacts of Trade Liberalization on Asian Dairy Market, University of Wisconsin-Madison Department of Agricultural & Applied Economics, Staff Paper No. 490, August 2005, http://www.aae.wisc.edu/pubs/sps/pdf/stpap490.pdf.

[149] Stephen K.W. et al. (1984), Five-year double-blind fluoridated milk study in Scotland. *Community Dentistry and Oral Epidemiology*, 12: pp. 223-229, http://www.ncbi.nlm.nih.gov/pubmed/6590173.

[150] Stephen K.W., Boyle I.T., Campbell D., McNee S. & Boyle P. (1984), Five-year double-blind fluoridated milk study in Scotland. *Community Dentistry and Oral Epidemiology*, 12: pp. 223-229.

The Borrow Foundation broke ground at home in 1993 when it began a program in St. Helens, Merseyside. It spread from there and currently there are 30,000 children aged 3 to 11 in nurseries and schools across the UK ingesting poisoned milk. The Borrow Foundation attributes its success to cooperation among various stakeholders in the depopulation scheme:

> *"Schools play an important role in supporting the health and wellbeing of children and young people and fluoridated milk has been integrated into the 'Healthy Schools' programme which is designed to help schools to identify and select activities and interventions that will improve the well-being of their pupils. The use of established school milk systems has been a key factor in the success of the programme and another has been the reconfiguration of existing resources within the health authorities to manage the schemes.*
>
> *A strong focus on communications is also an important aspect of the programme. The formation of the National Fluoridated Milk Group has provided the opportunity for those working at all levels within the programme to share experiences and support one another in the development of their respective schemes. This has been complemented by the establishment of a smaller group, dedicated to the needs of project workers working at an operational level."*

The "smaller group" is not named, as anonymity is imperative lest its members should become targets of retaliation by awakened citizens eager to protect their children by taking out the foot soldiers of the national fluoridation/depopulation programme.

Since 2002, the WHO Global Programme for Milk Fluoridation has been implemented under the leadership of Dr. Poul Erik Petersen. The eugenicists want to keep the momentum going while there is no public opposition to fluoridated milk and have charged the World Food and Agricultural Organisation (FAO) to *"co-ordinate information on school milk programmes"* and to *"move to develop and strengthen school milk programmes internationally"* from an International School Milk Information Centre that is to be established at FAO's headquarters in Rome.[151]

The advantages of milk fluoridation as a sterilization method are obvious. First, the state is in control and no child can escape; second, sterilization occurs at an early age when children are defenceless and have no way of knowing what is done to them or of resisting; third, it involves simple production techniques; and last, it is pandered as a gift from the state to children for their improved nutrition and prophylactic dental health.

[151] Page 8 in J. Bánóczy, P.E. Petersen, A.J. Rugg-Gunn (Eds.), *Milk fluoridation for the prevention of dental caries*, World Health Organization, Geneva, 2009, http://www.who.int/oral_health/publications/milk_fluoridation_2009_en.pdf.

## INDICATOR 10

Fluoride is classified a highly toxic element yet it is approved as a safe drug for mass medication and added to our drinking water. In fact it is the only substance that is added to our water, toxic or not, and that is allowed to reach our bodies instead of being filtered out. This is a clear and irreconcilable contradiction. How can this be?

There are two types of fluoride: calcium fluoride (CaF2), which is naturally occurring in groundwater and is relatively benign, and fluorides derived from waste products and are classified as toxins, namely fluorosilicic acid ($H_2SiF_6$), sodium silicofluoride ($H_2SiF_6$), and sodium fluoride (NaF). The latter three are waste by-products derived from the nuclear, aluminum and phosphate (fertilizer) industries and that is what fluoridating countries add to their municipal water.

Sodium fluoride (an odorless powder or crystal) was the first compound used and is considered the reference standard. It was used in the fifties and sixties but by the eighties it was replaced with fluorosilicic acid (a liquid) and sodium silicofluoride (powder or fine crystal). Neither one of these compounds is pure, but the latter two, by virtue of the fact that they are recovered by scrubbing gaseous emissions from the treatment of phosphate ores with sulfuric acid, contain trace amounts of lead, arsenic, beryllium, vanadium, cadmium, and mercury.[152]

Fluoride is an environmental liability from the phosphate industry since raw phosphate ore contains 2% to 4% fluoride. The fluoride is vaporized during the processing of the phosphate ore into highly toxic and volatile silicofluoride gaseous compounds that need to be harnessed in order to prevent serious environmental pollution.[153]

These compounds are now recovered but serve no purpose for industry since the fluoride captured in the scrubbers is combined with silica, which is difficult to separate and purify into an economically viable product. What industry needs and gets is high-grade calcium fluoride and that is usually imported from Mexico, China and South Africa. The silicofluorides that industry cannot use are added to the drinking water of 600 million people in at least two dozen countries around the world under the pretext that it is good for our teeth.

Alone in the United States some 200,000 tons of silicofluorides are dumped into the municipal water of thousands of communities each year. For industry it is a perfect solution to a long-standing problem, disposing of its toxic waste at a profit, and for governments it is the ideal method of sterilizing the populace at a relatively low cost.

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[152] Joel Kaufmann, *Water Fluoridation: a Review of Recent Research and Actions*, Journal of American Physicians and Surgeons Volume 10 Number 2, summer 2005, http://www.jpands.org/vol10no2/kauffman.pdf.

[153] Michael Connett, The Phosphate Fertilizer Industry: An Environmental Overview, Fluoride Action Network, May 2003, http://www.fluoridealert.org/phosphate/overview.htm#7.

To caring scientists and rational human beings it is a paradox and a crime, for how can governments assert that fluoride is a highly toxic pollutant that cannot be disposed of into the environment while at the same time approve its use for fluoridating our drinking water? More importantly, no research has been conducted on silicofluorides yet government agencies, the World Health Organization and UN agencies continue to assert that fluoride supplemented to our water and salt is good for our teeth. These assertions, even if correct, have no scientific validity whatsoever, as calcium fluoride – not silicofluorides – is the basis for claims of tooth decay prevention in early epidemiological studies.

Most disturbingly, the Fluoride Action Network has found that:

> *"despite 50 years of water fluoridation, the EPA has no chronic health studies on silicofluorides. All safety studies on fluoride to date have been conducted using pharmaceutical-grade sodium fluoride, not industrial-grade silicofluorides. A similar concession has also been obtained from the respective authorities in England.*
>
> *The defense made by agencies promoting water fluoridation, such as the US Centers for Disease Control, to the lack of such studies, is that when the silicofluoride complex is diluted into water, it dissociates into free fluoride ions or other fluoride compounds (e.g. aluminum-fluoride), and thus the treated water, when consumed, will have no remaining silicofluoride residues (Urbansky & Schock, 2000).*
>
> *This argument, while supported by a good deal of theoretical calculation is backed by a notable lack of laboratory data. Moreover, a recently obtained and translated PhD dissertation from a German chemist (Westendorf 1975) contradicts the claims. According to the dissertation, not only do the silicofluorides not fully dissociate, the remaining silicofluoride complexes are more potent inhibitors of cholinesterase, an enzyme vital to the functioning of the central nervous system."*

The two independent studies that do exist report

> *"a relationship between water treated with silicofluorides and elevated levels of lead in children's blood (Masters & Coplan 1999, 2000). The authors of these studies speculate that the silicofluoride complex may increase the uptake of lead (derived from other environmental sources, such as lead paint) into the bloodstream."*
>
> *The third finding, although perhaps of less concern, is that the silicofluorides, as obtained from the scrubbers of the phosphate industry, contain a wide variety of impurities present in the process water - including arsenic, lead, and possibly radionuclides. While these impurities occur at low concentrations, especially after dilution into the water, their purposeful addition to water supplies directly violates EPA public health goals. For instance, the EPA's Maximum Contaminant Level Goal for arsenic, a known human carcinogen, is 0 parts per billion. However, according to the*

*National Sanitation Foundation, the addition of silicofluorides to the water supply will add, on average, about 0.1 to 0.43 ppb, and as much as 1.6 ppb, arsenic to the water."*[154]

Just because natural drinking water contains 0.1 to 0.2 ppm fluoride and nearly all food has traces of fluoride does not mean silicofluoride, which is an industrial byproduct that is added to our water, is safe. Given its dangerous contaminants it may have a totally different effect on the body than sodium fluoride and certainly a more damaging effect than the naturally occurring calcium fluoride.

Of course, the eugenicists know this which is why there is an ongoing effort by the WHO to obfuscate statistics by combining artificial with natural fluoridation in their graphs and statistics.

I contend that the statistical differences in the occurrence of illnesses related to fluoride result not only from the degree, concentration and duration of fluoridation but also from the fluoridating compounds used by various jurisdictions.

Water fluoridating countries use hydrofluosilicic acid ($H_2SiF_6$) for the vast majority of their municipal water sources. The vast majority of the international milk fluoridation schemes (in Peru, Bulgaria, China, Russia, Thailand and the United Kingdom) use sodium fluoride as the fluoridating agent with the only exception being Chile which adds disodium monofluorphosphate (MFP) to its powdered milk and milk derivatives. Salt fluoridating countries use calcium fluoride (CaF2), the only naturally occurring fluoride, which is partly why it is the easiest type of mass fluoridation to implement.

Regardless what type of fluoride is used, they all have the same devastating effect on our reproductive systems and fertility. The same cannot be said about the various degrees of collateral damage caused by different types of fluoridating compounds. Silicofluorides appear to be more devastating to our overall health than sodium fluoride while calcium fluoride seems to be the most benign. I venture to guess that this is the result of the many highly toxic trace elements silicofluorides contain, while sodium fluoride is mostly free of and calcium fluoride is the most pure.

[154] Ibid.

**INDICATOR 11**

Fluoridation is pursued with uncharacteristic determination by the governments of countries rich and poor alike despite clear evidence that its ill-effects on health far outstrip the purported benefits to dental health due to fewer caries. In fact, its usefulness in combating caries has been shown by numerous studies to be questionable if not fictitious.[155]

It is not my intention to give a comprehensive account here of the many health repercussions of fluoride, but merely a sketch. For a detailed review please read the 2011 Appeal issued by the Washington Action for Safe Water (WASW).[156]

*Fluorosis*

While touted as a miracle drug in combating tooth decay, fluoride is known to cause fluorosis, the discoloration (figure 1), streaking (figure 2) and staining (figure 3) of tooth enamel caused by excessive exposure to fluoride during tooth development. The risk of fluoride overexposure occurs between the ages of 3 months and 8 years.

*FIGURE 1: Mild fluorosis.*

*FIGURE 2: Moderate fluorosis.*

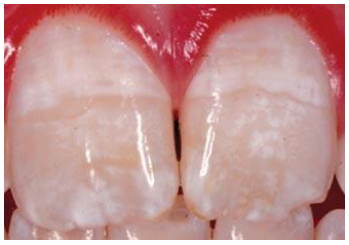


*FIGURE 3: Severe fluorosis.*

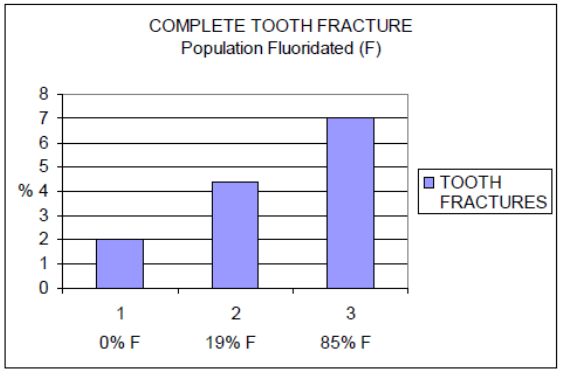
The most revealing and useful study – *"aimed at describing the changes in prevalence and severity of dental fluorosis and dental caries among the Hong Kong school children in relation to changes in the water fluoride concentration" – comes from Asia.* Honk Kong is uniquely useful for controlled studies because it has had a continuous 100% water fluoridation policy since 1961 and also because it has tweaked the fluoride concentrations at well-known intervals. The fluoride concentration used between 1961-1967 was 0.8 parts per million (ppm), between 1967-1978 it was changed to 1.0 ppm, in 1978-1988 it was lowered to 0.7 ppm, and after 1988 it was kept at 0.5 ppm. The study found that dental fluorosis in 1960, thus prior to the introduction of water fluoridation, was almost non-existent at 1%. By 1968 it had increased to 59% and by 1980 to a whopping 70%. But as soon as the concentration was dropped from 0.8 to 0.7 ppm so did the incidence of fluorosis drop to 47% by 1986 and when the concentration was lowered again from 0.7 to 0.5 ppm fluorosis also dropped to only 9% by 2001. *"The changes in the prevalence of fluorosis have been large and followed closely the changes in the water fluoride*

[155] Joel M. Kaufman, *Water Fluoridation: a Review of Recent Research and Actions*, Journal of American Physicians and Surgeons, Volume 10, Number 2, Summer 2005, http://www.jpands.org/vol10no2/kauffman.pdf.

[156] Appeal to HHS, CDC, EPA & FDA, by Washington Action for Safe Water (WASW), http://washingtonsafewater.com/wp-content/uploads/osmunson-comment-to-epa-3-13-11.pdf.

*concentration."* As for dental carries, changes in the water fluoride concentration have had little or no effect.[157]

The health impact of fluoridation is also felt on tooth fractures. Statistical evidence shows that fluoridated water makes teeth harder and therefore increases tooth fractures[158], which are a much harder dental problem to deal with than caries.



Study after study confirms that the artificial fluoridation of water at levels deemed ideal by the World Health Organization and national health authorities causes widespread dental fluorosis and other dental problems in children throughout the world and has limited or no effect on combating dental carries. This information alone makes water fluoridation unjustifiable both as an economic and medical investment and in the name of caution should have led to its cancellation a long time ago. The fact that it did not can only be explained by the secret purpose it serves, which trumps its far more alarming effects on human health; effects that require an army of censors to bury and a sea of propaganda to drown the truth in.

## *Osteosarcoma*

Osteosarcoma is the most common type of bone cancer in children, adolescents and young adults. 800 Americans of which 400 are children fall ill with it annually.[159] The incidence in the US, at 5-6 cases per million, is twice as high as in Europe, at 2-3 cases per million (Source: EURAMOS). One study showed 6.9 times the occurrence of osteosarcoma in fluoridated communities compared to non-fluoridated areas.[160]

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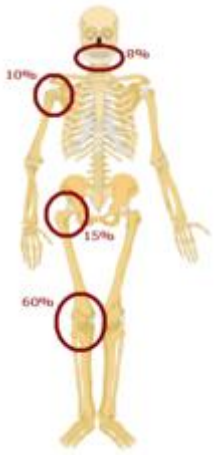
[157] E.C.M. Lo and A.H.H. Wong, *2440 Water fluoride concentration and fluorosis in Hong Kong in 1960-2001*, University of Hong Kong, http://iadr.confex.com/iadr/2006Brisb/techprogram/abstract_82371.htm.

[158] Osmunson B., "Water Fluoridation Intervention: Dentistry's Crown Jewel or Dark Hour", 1998, pp. 103-18, http://www.fluoride-journal.com/98-31-2/312103.htm.

[159] How many people get osteosarcoma? American Cancer Society, http://www.cancer.org/Cancer/Osteosarcoma/OverviewGuide/osteosarcoma-overview-key-statistics

[160] John R. Lee, Fluoridation and Bone Cancer, Fluoride, 1993; 26(2): pp. 79-82, http://www.slweb.org/lee-osteosarcoma.html.

Osteosarcoma may not be caused by fluoride but by the trace radioactive elements contained in silicofluorides, which may explain the greater prevalence of the illness in America than in Europe, where with the exception of Ireland silicofluorides are not widely used.



Considering the eugenic nature of the water fluoridation policy in the U.S. and elsewhere, it is safe to guess that potassium fluoride is used to fluoridate higher socio-economic areas and silicofluorides the rest of the population. Most likely the lower the socio-economic profile of an area the higher the fluoride concentration of the water. Drippers are probably calibrated accordingly for the poor areas so as to measure a lower concentration than actually used.

The authorities have long suppressed the link between fluoridation and bone cancer[161], but the truth is now out:

> *"In a report authored by Perry D. Cohn, Ph.D., M.P.H., for the New Jersey Department of Environmental Protection and the New Jersey Department of Health, the rates of bone cancer in fluoridated and non-fluoridated areas were compared. Both by counties or by municipalities, males under the age of 50 had 3 to 7 times as many bone cancers in the fluoridated areas. Males 10-19 years old fared the worst.*
>
> *Cancer rates in the ten largest fluoridated cities in the United States and in the ten largest non-fluoridated cities were found to be the same before fluoridation began. After 20 years, the ten fluoridated cities had 10% more cancer deaths than the non-fluoridated cities. The cancers were found in the tongue, mouth, pharynx, esophagus, stomach, colon, rectum, pancreas, larynx, bronchi, and lungs."*[162]

The best outcome of osteosarcoma is amputation. Survival prognosis is 30% and depending on metastases patients can live 2-10 years after diagnosis. Amputation is the initial treatment followed by chemotherapy.

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[161] Timeline: Fluoride and Osteosarcoma, http://www.fluoridealert.org/health/cancer/osteosarcoma-timeline.html.
[162] Garry Null, Fluoridation: Medicating our Water, Part 2, 5 June 2012, http://prn.fm/2012/06/05/gary-null-phd-fluoridation-medicating-water-part-2/#axzz25jXtZ8Vn, discusses P.D. Cohen, *An Epidemiologic Report on Drinking Water and Fluoridation*, Trenton, NJ: New Jersey Department of Health; 1992.

The bone degeneration caused by fluoride is also behind the epidemic of damaged joints of elderly people in the United States and Canada. The numbers are so large and place such burden on the government-funded medical services of Canada that patients have to wait for as long as one year to get the necessary hip or knee replacement surgery, time during which they live with excruciating pain. In the US only those with adequate medical insurance get surgery while the majority suffer.

*Intelligence and brain development*

One of the very first studies done in the U.S. on the effects of fluoridation exposed its damaging effects on the brain. Dr. Phyllis Mullenix, Chair of Toxicology at the Forsythe Dental Institute, studied the neurotoxicity of sodium fluoride on rats and found that it causes symptoms akin to attention deficit and hyperactivity disorder in humans.[163] She was immediately fired and did not receive a research grant since.

A collaborative effort by researchers from Harvard University, China Medical University and the University of Southern Denmark was published in July 2012 and is the most comprehensive analysis to date on the subject of fluoride and intelligence. They analyzed 27 studies done over the past 22 years that deal with the effect of fluoride on brain development, IQ and neurotoxicity. Their meta-analysis found that *"children who lived in areas with high fluoride exposure had lower IQ scores than those who lived in low exposure or control areas."*

What is most alarming about their findings is that the majority of the fluoride-exposed children scrutinized by the 27 studies had been drinking water with fluoride concentrations between 1.5 and 4.5 mg/L, thus in concentrations that are within the levels of 0.7-1.2 mg/L recommended by the U.S. Department of Health and Human Services and by the World Health Organization and the 4.0 mg/L limit recommended by the U.S. Environmental Protection Agency and considered acceptable in the US and other countries that still use water fluoridation.

Clearly these so-called "safe" levels are anything but safe, for invariably the researchers have concluded that children in the high fluoride areas scored lower or significantly lower IQ scores than those in the reference areas.

Moreover, the Harvard team noted, *"a recent cross-sectional study based on individual level measure of exposures suggested that low levels of water fluoride (range 0.24 to 2.84 mg/L) had significant negative associations with child's intelligence (Ding et al. 2011)"* and *"their findings are consistent with an earlier review (Tang et al. 2008)."*[164]

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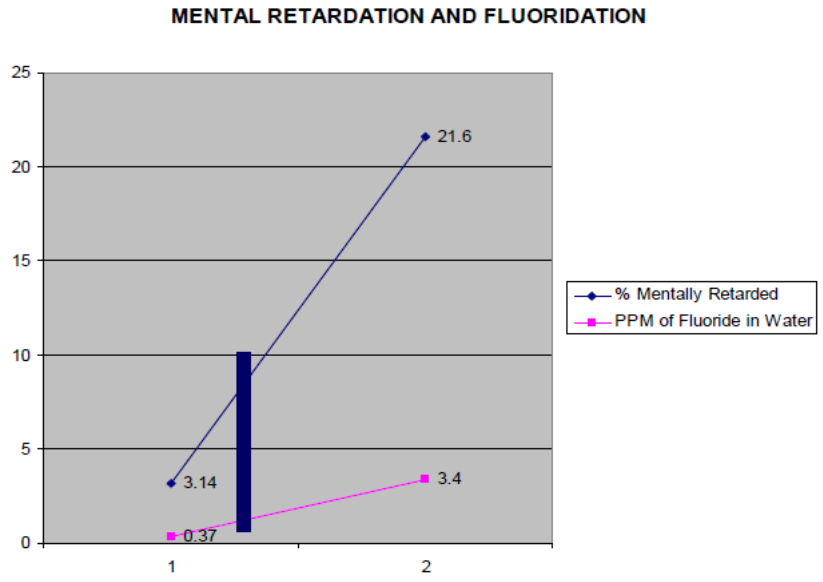
[163] Phyllis J. Mullenix, Pamela K. Denbesten, Ann Schunior & William J. Kernan, Neurotoxicity of Sodium Fluoride in Rats, Neurotoxicology and Teratology, Vol. 17, No. 2, pp. 169-177, 1995, http://www.scribd.com/doc/15945451/Neurotoxicity-of-sodium-fluoride-in-rats-Phyllis-J-Mullenix-Neurotoxicology-and-Teratology-Vol-17-No-2-pp-169177-1995.

[164] Anna Choi, Guifan Sun, Ying Zhang, "Philippe Grandjean, Developmental Fluoride Neurotoxicity: A Systematic Review and Meta-Analysis", *Environmental Health Perspectives*, 20 July 22012, http://dx.doi.org/10.1289/ehp.1104912

That water fluoridation is the root cause of the alarming drop in academic aptitude among children in first world nations is now an incontestable fact. Among the research analyzed by Harvard, a study conducted by the Center for Epidemic Disease Control in China found that each additional milligram of fluoride detected in every liter of a child's urine was associated with a 0.59 point decrease in their IQ square and that fluoride exposure slashes the number of people achieving high IQ by more than 70%.

Tang, the Chinese researcher who looked at sixteen case-controlled studies from 1988 to 2008, found that *"children who live in a fluorosis area have five times higher odds of developing a low IQ than those who live in a non-fluorosis area or in a slight fluorosis area."*[165]

Liu and his colleagues, a Chinese team of scientists studying children in Tianjin, reported a 21.6% mental retardation rate with fluoride content of 3.14 ppm and a 3.4% mental retardation rate at 0.37 ppm of fluoride,[166] therefore showing that the so-called "safe" and "optimal" levels advocated by health authorities and the WHO presumably for the sake of our teeth are in fact highly damaging to our intelligence, which is of far greater importance than teeth.




In graphing the increases in the prevalence of mental retardation due to higher concentrations of fluoride in drinking water, it has been established that fluoride at 1 ppm, which is the recommended level for countries with temperate climates, contributes to a doubling of mental retardation.[167]

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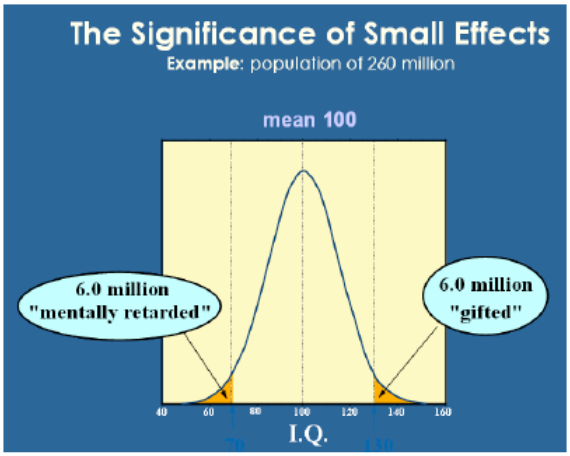
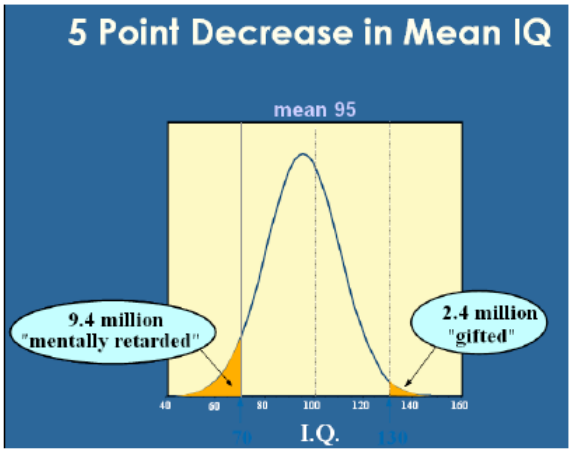
[165] Tang Q.Q., Du J., Ma H.H., Jing S.J. & Zhou X. J. (2008), Fluoride and children's intelligence: a meta-analysis, Biol Trace Elem Res, 2008 Winter; 126(1-3):pp. 115-20, Epub 2008 August 10, http://www.ncbi.nlm.nih.gov/pubmed/18695947.

[166] Liu S., Lu Y., Sun Z., Wu L., Lu W., Wang X. & Song Y. (2000), Report on the intellectual ability of children living in high fluoride zones. *The Chinese Journal of Control of Endemic Disease*, 200. 15(4):231-232 (in Chinese).

[167] Appeal to HHS, CDC, EPA & FDA,Washington Action for Safe Water (WASW), see p. 176, http://washingtonsafewater.com/wp-content/uploads/osmunson-comment-to-epa-3-13-11.pdf.

If fluoridation at "optimal" levels doubles mental retardation what does it do to children at the other end of the intelligence spectrum, the highly gifted and how does it affect everyone in between? Physicians for Social Responsibility, starting with a mean IQ of 100 points as their reference, have computed a bell curve, which shows that fluoridation causes an IQ drop of 5 points throughout the population, a 63% increase in the number of mentally retarded and a halving of the number of gifted children.




Less optimistic estimates, such as that done by Li in 2003, reported an overall decrease in IQ of 8 points and Qin found in 1990 a reduction in intellectual development even at less than 0,2 ppm fluoride in water. Most alarmingly,

> *"These are studies of the effect of naturally occurring (often) calcium fluoride, not artificially added hydrofluorosilicic acid, which is much more toxic than naturally occurring fluoride. Nor do these studies measure the other sources of fluoride ingested, such as fluoridated toothpaste, dental products, post-harvest fumigants and fluoride pesticides. Nevertheless, the trends and in some cases the intake would be comparable with the USA. Because artificially added hydrofluorosilicic acid is much more potent than naturally occurring calcium fluoride, outcomes would be expected to be more severe in the United States than in these studies.*
>
> *Ranking the 50 USA states in order of whole population fluoridated and plotting the reported rate of mentally retarded 6-17 year olds, reveals an increase in mental retardation from about 50/10,000 to 160/10,000 of the population.*
>
> *A tripling of the mentally retarded population in fluoridated communities compared to isolated communities in developing countries, which are the subjects of the IQ studies discussed above, is possible given that fluoridated water represents about half an individual's fluoride exposure. Evidence that fluoride crosses the placenta to the fetus contributing to harm and higher blood levels in fluoridated communities could explain part of the risk of higher mental retardation rates*

*in fluoridated communities. And once again hydrofluorosilicic acid is more toxic than naturally occurring fluoride such as CaF.*

*Comparing the USA with other countries, the Organization for Economic Co-operation and Development reported (2000) the prevalence of disability (not just mental retardation) in some European countries and the USA:*

> *"The United States Category A prevalence rate was 5.62%, as compared to European rates of: 1.33% for Austria, 2.53% for France, 1.45% for Germany, 2.57% for Ireland, 2.13% for Italy, 1.77% for the Netherlands, 2.56% for Spain, and 1.62% for Switzerland.""*[168]

These numbers are very revealing given what we now know about the different types of fluoridation countries employ. We see that France, Ireland, Spain and Italy, all of whom fluoridate their tap and/or bottled water either with sodium fluoride or with silicofluorides, which are artificial compounds, have higher disability rates than Austria, Germany and Switzerland, which use salt fluoridated with naturally occurring calcium fluoride. The United States has a far greater proportion of disabilities because it has used water fluoridation for much longer and to a greater degree than the European countries listed here. A high percentage of the US population has been exposed to fluoridated water for three, four and even five generations.

Those who have lost 10 points off their IQ in the first generation, an additional 10 in the second, and another 10 in the third have been intellectually degraded to such an extent as to make the reading of this book highly improbable and understanding it impossible if the intellectual endowments of their genetic lines were average when fluoridation began. And these are the very people who can ill afford to lose 10 more IQ points in the fourth generation and who therefore most need to read this book if they are to protect their offspring and ensure that their genetic lines do not go extinct.

This is what the eugenicists are doing to our children.

The scientists, politicians and administrators who have planned and executed this diabolical plan know this of course and seem to have no remorse. They justify it with scientific arguments and demographic prerogatives as an economic and environmental necessity, but in the back of their

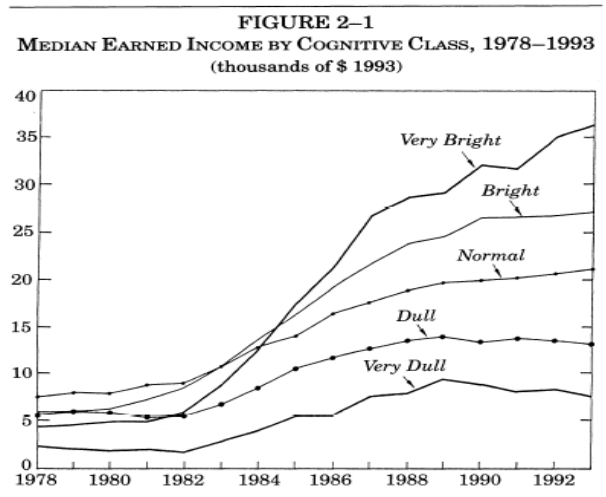
[168] Appeal to HHS, CDC, EPA & FDA, Washington Action for Safe Water (WASW), see pp. 178-9, http://washingtonsafewater.com/wp-content/uploads/osmunson-comment-to-epa-3-13-11.pdf.

minds in the now empty place that used to house their consciences hopefully rings an echo in a solemn tone reminding them of the unspeakable crimes they have committed against their fellow men, against God's creation, and against Nature's work of evolution, the millions of mutations over eons of time it took Mother Nature to hone every one of us into the glorious creatures that we are, or should I say, were.

They have destroyed the greatness of man and the apogee of nature.

An important factor in the intellectual degradation of Western and especially North American children – and which also explain the higher rates of disability in the US as opposed to Europe and elsewhere – is the higher prevalence of infants fed with formula rather than breastfed. In North America feeding babies formula is far more common than in Europe and even more so than in the developing world where breastfeeding is nearly universal.

That means that in areas in which drinking-water is fluoridated at levels of 0.7 to 1 ppm infants fed formula receive 50–100 times more fluoride than exclusively breast-fed infants and they receive it at a time when their bodies are most vulnerable to chemically-induced damage. That such a heinous assault on innocents is the calculated result of the conscious and intentional actions of eugenicists, is an unforgivable and unimaginable crime which deserves the harshest possible punishment.




Those who intelligence has been degraded to a level far lower than they would have been at had their genetic endowment not been tampered with by conscious fluoridation policy are condemned to a life of poverty, as statistics clearly show intelligence and earning power go hand in hand.

*Fertility*

Medical research that shows the detrimental effects of fluoride on fertility is even more conclusive than that on intelligence but just as rare. What jumps to attention immediately is the conspicuous scarcity of research on what should be a subject of great interest and of the greatest importance. This is of course the result of strict political interference and control of the research agenda which has made the subject of fluoridation and infertility taboo especially in the West. Not surprisingly, most research data on this subject comes from China and India, the only countries in the world outside Africa (and a few other exceptions here and there) that have not used water fluoridation to sterilize their populace.

The diverging results between Western and Eastern research has also not gone unnoticed. The International Society for Fluoride Research notes:

> *"It has become increasingly evident that there is a striking East/West disparity in regard to health effects of fluoride in drinking water. Widespread areas of endemic fluorosis in India and China, for example, have led to urgent concerns over adverse health effects of this exposure to fluoride. … In contrast, reviewers of toxic effects of fluoride in the West often seem to downplay the concern, and appear obliged to highlight erroneous claims for beneficial health effects of fluoride."*[169]

I will not present research showing the toxic effects of fluoride on animal fertility and will instead restrict myself to research on humans, which shows overwhelmingly that fluoride is devastatingly detrimental to human fertility.

In 1977, Russian scientists Tokar and Savchenko set out to see if inorganic fluoride compounds affect the function of the pituitary-testis system, which plays a critical part in the development and regulation of the reproductive and immune system. They found that fluoride does indeed disturb the hormonal and possibly the germinative functions of the testes.[170]

Chinoy and Narayana, from the Gujarat University in India, have shown in 1994 that sodium fluoride causes *"morphologic anomalies"* in spermatozoa that lead to *"a significant decline in sperm motility"*, thus on the ability of sperm to swim towards the egg and fertilize it.[171] Their study is particularly important as it provides an explanation as to exactly how fertility is affected.

Freni, from the National Center for Toxicological Research in Arkansas, has shown in 1994 that exposure to high fluoride concentrations in drinking water is associated with decreased birth rates.[172]

In 2003, Dr. Ortiz-Perez and his colleagues from the Faculty of Medicine at the University of San Luis Potosi in Mexico, has set out to see if exposure to fluoride at relatively low doses of 3-27mg/day has an effect on the human reproductive system. Their data shows that such exposure does disrupt the reproductive hormones in men.[173]

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[169] *New Review Recapitulates Urgency of US National Research Council on Fluoride Report*, Guest editorial review Fluoride 44(2)57-59, April-June 2011, http://www.fluorideresearch.org/442/files/FJ2011_v44_n2_p057-059_sfs.pdf.

[170] Tokar VI, Savchenko ON. (1977). Effect of inorganic fluorine compounds on the functional state of the pituitary-testis system. *Probl Endokrinol* (Mosk). 23(4):104-7, http://www.ncbi.nlm.nih.gov/pubmed/905251.

[171] Chinoy, NJ, Narayana MV. (1994). In vitro fluoride toxicity in human spermatozoa. *Reproductive Toxicology* 8(2):155-9. http://www.ncbi.nlm.nih.gov/pubmed/8032126?dopt=Abstract

[172] Freni SC. (1994). Exposure to high fluoride concentrations in drinking water is associated with decreased birth rates. *Journal of Toxicology and Environmental Health* 42:109-121. http://www.ncbi.nlm.nih.gov/pubmed/8169995?dopt=Abstract

[173] Ortiz-Perez D, et al. (2003). Fluoride-induced disruption of reproductive hormones in men. *Environmental Research* 93(1):20-30. http://www.ncbi.nlm.nih.gov/pubmed/12865044?dopt=Abstract

Susheela and Jethanandani, from the All India Institute of Medical Sciences in New Delhi, India, have focused on whether men's testosterone levels are affected by fluoridated water. They found in 1996 that *"fluoride toxicity may cause adverse effects in the reproductive system of males living in fluorosis endemic areas."*[174]

The most recent, exhaustive and illuminating research on fluoride and fertility is a compilation and comparison of all pre-existing data on the subject, which was completed in 2009 by Chinese researchers from Chengdu University. They summarize the effects of fluoride on human fertility as follows:

> *"Although artificial fluoridation of water supplies is practiced in many parts of the world in an effort to reduce the incidence of dental caries, there is growing evidence that the resulting increased exposure to fluoride (F) may cause serious toxic effects. Several clinical investigations and animal experiments suggest that F has adverse impacts on male reproductive function, including structural and functional defects in spermatozoa, a decrease in sperm count, disturbances in the levels of reproductive hormones, alterations in the epididymis and accessory reproductive glands, and reduced fertility."*

Their conclusion:

> *"Our current scientific understanding of the potential links between environmental exposure to F and decreasing human fertility rates is growing. From overexposure in the environment, F exerts its toxic effects by disturbing normal architecture and functions of spermatozoa, impairing the process of spermatogenesis, and disrupting hormone levels required for male reproduction."*[175]

This is the extent of research on a subject that should be at the top of the agenda for health departments and university centers throughout the world. Nevertheless, the results are clear. Fluoride is damaging our reproductive systems beyond repair and infertility, as a result, is endemic throughout the West and growing by leaps and bounds in countries where fluoridation is more recent.

When one considers that in the West 15% of the population is gay or lesbian (undoubtedly in great part due to the mutagenic effects of fluoride) and that 15% of couples of childbearing age are infertile (clearly due mostly to artificially fluoridated water, salt and milk), a total of 30% of the population has been deliberately eliminated from of the procreation chain. Their genetic lines have been terminated by the very people we entrust our health and our destinies to. There has never been a greater betrayal in human history and never a greater crime against individuals or mankind.

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[174] Susheela AK, Jethanandani P. (1996). Circulating testosterone levels in skeletal fluorosis patients. *Journal of Toxicology and Clinical Toxicology* 34(2):183-9, http://www.ncbi.nlm.nih.gov/pubmed/8618252?dopt=Abstract.

[175] Hu Long, Ying Jin, Mu Lin, Yu Sun, Liang Zhang and Carole Clinch, *Fluoride Toxicity in the Male Reproductive System*, Research Review Fluoride, 42(4)260–276, October-December 2009, http://www.fluorideresearch.org/424/424/files/FJ2009_v42_n4_p260-276.pdf.

And the authorities cannot claim that interfering with fertility is not a recognized crime. In fact, the Convention on the Prevention and Punishment of the Crime of Genocide ratified by the UN General Assembly in 1951, states under Article 2(d) that *"imposing measures intended to prevent births within the group"* is a genocidal act. Under Article 2(c) it further states that *"deliberately inflicting on the group conditions of life calculated to bring about its physical destruction in whole or in part"* is an act of genocide.[176]

Our leaders have been waging chemical warfare on us with genocidal intent for the past 60 years and in full knowledge of their crime. This is not an isolated case or a brief period of time, it spans at least half a century of cold-blooded policy.

Their so-called safe levels of fluoride in our water have probably been rarely respected. Why would they, if our annihilation and not our health has been the purpose of fluoridation from the very beginning?! There have been innumerable accidents when fluoride injection pumps have malfunctioned and many more intentional releases that have targeted defenceless groups[177] and have not only killed and poisoned many people but also done irreparable damage to their reproductive systems. The authorities have also given themselves legal cover to go to much higher and more toxic concentrations than the WHO determined "safe" levels. In 1985, the U.S. Environmental Protection Agency (EPA) set 4 ppm (up from 2 ppm) as the safe level for fluoride in drinking water and prevailed in a lawsuit challenge.[178]

Considering that the true purpose of fluoridation is our slow extermination, our health is the furthest thing on the minds of the elites. In their estimation the more of the stuff we get in our bodies the better.

While our genetic lines are slowly being extinguished, theirs are flourishing. The biggest adherents and sponsors of population control programs have 3 or more children and they shamelessly advocate only one child for everyone else.[179] They do not lead by example because their system of eugenics is meant to advantage them and disadvantage us, as it is not only for population control but also for population selection.

In the meantime, Europeans are being decimated by lowest-low fertility rates which denote less than 1.3 children per woman and that have prevailed for decades in some countries. The situation is dire and universal in Europe:

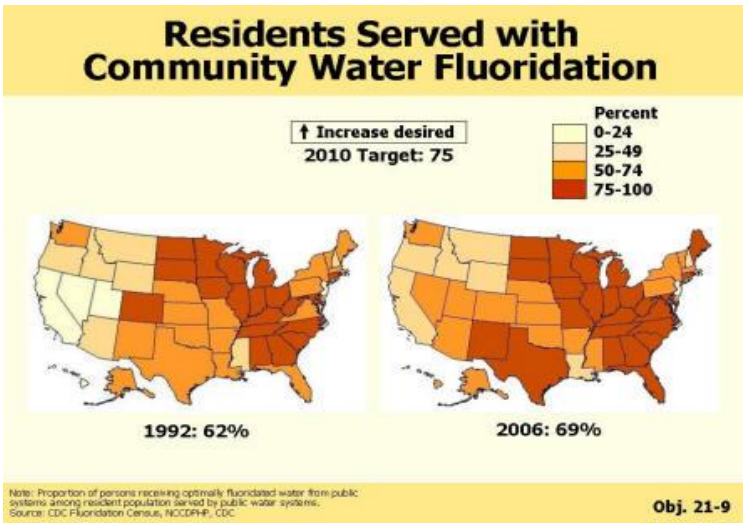
> *The emergence of sustained lowest-low fertility first occurs in Southern, Central and Eastern European countries. Based on Council of Europe (2003), seventeen countries attained lowest-low fertility levels by 2002 (Table 1): three in Southern Europe (Greece, Italy and Spain), ten in*

[176] Convention on the Prevention and Punishment of the Crime of Genocide, http://web.archive.org/web/20080502140534/http://www.unhchr.ch/html/menu3/b/p_genoci.htm.
[177] Gary Null, *Fluoride: The Deadly Legacy*, pp. 18-9, http://www.garynull.com/storage/pdfs/UpdatedFluoride.pdf.
[178] Groves B., *Fluoride: Drinking Ourselves to Death*. Dublin, Ireland, Newleaf, 2001.
[179] Bill Gates and Warren Buffet have each three children, while George Soros and Ted Turner have each five children. David Rockefeller Junior, who is the major proponent of population control, has six children.

*Central and Eastern Europe (Bosnia and Herzegovina, Bulgaria, Czech Republic, Hungary, Latvia, Lithuania, Poland, Romania, Slovak Republic, Slovenia) and four in the former Soviet Union (Armenia, Belarus, Moldova, Ukraine). The first countries to reach lowest-low fertility levels were Spain and Italy in 1993. They were then joined by Bulgaria, the Czech Republic, Latvia and Slovenia in 1995, and by the remaining lowest-low fertility countries between 1996 and 2002. In addition, several other countries in Central and Eastern Europe and the Balkans have very low TFR levels, and Croatia (1.34), Estonia (1.37), Russia (1.32) will possibly join—or re-join, such as Russia—the group of lowest-low fertility countries. Moreover, other European countries with traditionally low fertility, such as Austria (1.34), Switzerland (1.4), and Germany (1.31), are candidates that may soon join the group of lowest-low fertility countries."*[180]

Government propaganda and obstructionism continue to hide the true cause of low fertility rates by ascribing the decline to enlightened choice on the part of women and socio-economic conditions. But the reality is that low fertility rates are not due to lack of desire to have children. Research on childlessness in Europe shows that *"even in lowest-low fertility contexts, the biological, social and economic incentives for children are sufficiently strong that most women (or couples) desire to have at least one child (e.g., Foster 2000; Kohler and Behrman 2003; Morgan and King 2001)."* [181]

Scientists too are disingenuous for in their statements fail to mention or downplay the sterilizing and dumbing effects of fluoride, knowing full well that doing so means career suicide, so instead they focus on the less explosive side-effects of water fluoridation, such as bone cancer and liver and kidney damage, as these befall only a small percentage of the population and will not alarm the censors, disrupt the global depopulation program, or jeopardize future research grants.




Statistical indication of the devastating effects of fluoridation on fertility comes from America's demographic patterns, which show that *"population growth was concentrated in the South and West of the United States"* while *"slow population growth on the state-level is primarily concentrated in the northern and eastern parts"* of the country.[182]

[180] Hans-Peter Kohler, Francesco C. Billari and José A. Ortega (2006), "Low Fertility in Europe: Causes, Implications and Policy Options." In F. R. Harris (Ed.), *The Baby Bust: Who will do the Work? Who Will Pay the Taxes?* Lanham, MD: Rowman & Littlefield Publishers, 48-109, pp. 4-8, http://www.ssc.upenn.edu/~hpkohler/papers/Low-fertility-in-Europe-final.pdf
[181] Ibid., p. 8.
[182] Ibid., p. 28.

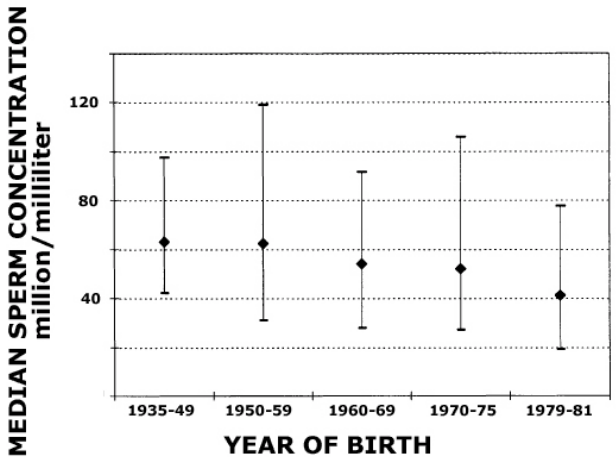
This demographic picture coincides with the fluoridation map of the US, which shows that the South and West, where population growth is highest, are least fluoridated while the North and East, where population growth is smallest, is most fluoridated.

The United States has 8 million couples of childbearing age who have difficulties conceiving. This means that 15% of the population is infertile and they all have fluoridation to thank for the termination of their genetic lines. Similar statistics apply to Canada.[183]

Sperm counts in Europe tell a similar story. Danish demographers have recently come to a long-overdue realization. They have come to:

> *"challenge the conventional demographic interpretation that reductions in fertility in industrialized nations can be explained completely by changes in the choices that women are making about whether and when to bear children.*
>
> *Jensen et al. explore instead the possibility that part of the decline in fertility rates in the industrialized world that has occurred over the past several decades is a result of long-term trends in male reproductive health, particularly sperm density and quality. They propose the possibility that fewer babies are born in part because couples are having greater difficulty conceiving."*[184]

The reason couples in the industrialized world have greater difficulty conceiving is that they drink fluoridated water and eat fluoridated salt and that they have done this for 60 years or two and in some cases even three generations. Obviously the damage done to their reproductive systems is cumulative; a fact confirmed by statistical evidence which shows that sperm counts have declined substantially for the last two generations, which are the generations subjected to fluoridation.




Clearly, the missing link Danish demographers infer from their statistics on sperm is fluoridation. The differences from one decade to another reflects the concentrations of fluoride and/or the means of ingestion used during the developmental years of each population cohort, consequently the higher the concentration the more drastic the effect on sperm. The overall downward trend, however, is irrefutable.

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[183] Sharon Kirkey, *Infertility rates rising for Canadian couples*, 15 February 3012, http://www.ottawacitizen.com/health/Infertility+rates+rising+Canadian+couples/6157547/story.html.

[184] Jensen, TK, Carlsen, E, Jørgensen, N, Berthelsen, JG, Keiding, N, Christensen, K, Petersen, JH, Knudsen, LB and Skakkebæk, NE. 2002. *Poor semen quality may contribute to recent decline in fertility rates* *Human Reproduction* 17(6): 1437-1440. http://protectingourhealth.net/newscience/infertility/2002/2002-06jensenetal.htm.

Skeptics and naysayers will argue that Denmark and its Scandinavian neighbours do not fluoridate and never have fluoridated their tap water or salt. This appears to be the case indeed[185], which begs the question of how one can assert that fluoride entered their bodies in such quantities as to affect their reproductive health. The answer is by virtue of their dentists and their government funded dental plans. Denmark, Sweden, Norway and Finland – all of whom are among the first European countries to achieve below replacement fertility levels – have *"compulsory public dental health care services to children"*[186]. It is through these programs the sterilization effort has been advanced under the guise of equal dental health care and virtually every Scandinavian child has been subjected to one or more of the following topical applications of fluoride in high concentrations: school-based fluoride mouth-rinsing programmes with 0.2% sodium fluoride (900 ppm F) were popular in the 1970s and 1980s, the application of fluoride varnishes (22,600 ppm F) three times a year, fluoride-containing gels (12,300 ppm F) applied with trays twice a year, fluoride foam (12,300 ppm F), slow-release fluoride devices implanted in children's mouths and releasing fluoride for up to a year, and the distribution of fluoride containing tablets for home use.[187]

Considering the sky-high concentration of fluoride applied directly into the mouths of children throughout their developmental years, it is no wonder Scandinavians suffer from low sperm quality and fertility problems at endemic rates!

Whether knowingly or unknowingly, Scandinavian dentists, more than their counterparts elsewhere, are merchants of death directly involved in the sterilization of their fellow citizens. This may explain why dentists suffer the highest suicide rates. So far researchers have attributed their high incidence of suicide to occupational stress[188], but have failed to explain why. This conclusion is supported also by the fact that Scandinavian dentists are more likely to commit suicide than American dentists[189]; the former being far more involved in sterilizing their fellow citizens with fluoride than the latter. For many the burden of their conscience is too heavy to bear. I believe Scandinavian governments, on the advice of the WHO, have opted out of water and salt fluoridation and have chosen direct topical fluoride applications by dentists in a conscious effort to confuse and confound any attempts at statistical correlations between fluoride and infertility. Given the high commitment of Scandinavian countries to the UN agenda and their intimate involvement with international objectives makes this a highly probable hypothesis.

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[185] There is also the possibility that Denmark is not being forthright and is fluoridating on the sly. The Department of State of Indiana lists Denmark as one of 60 countries that adjusts the fluoride intake of its citizens either through water or salt fluoridation. http://www.in.gov/isdh/24524.htm.

[186] *News Item: Water Fluoridation in Eleven Countries*, Soc. Sc. Med. Vol. 16, pp. 2155 to 2158, 1982, Pergamon Press, UK.

[187] *Topical Fluorides: Evidence-based guidance on the use of topical fluorides for caries prevention in children and adolescents in Ireland*, Irish Oral Health Services Guideline Initiative, 2008, http://ohsrc.html/guidelines.html.

[188] Steven Stack, Suicide risk among dentists: A multivariate analysis, Deviant Behavior, Vol. 17, Issue 1, 1996, pp. 107-117, http://www.tandfonline.com/doi/abs/10.1080/01639625.1996.9968016.

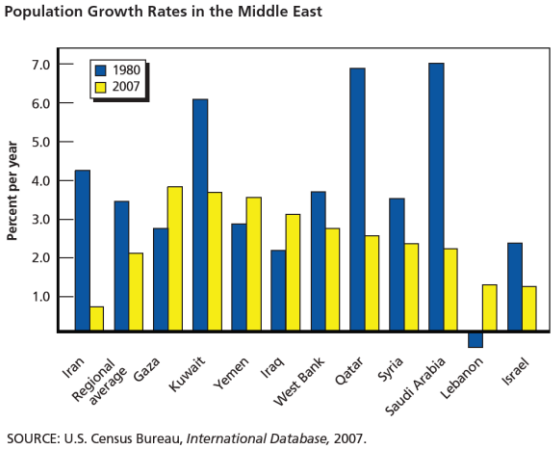
[189] Jack A. Gerschman & Graham D. Burrows, Stress and distress in dentistry, *Stress Medicine*, Volume14, Issue 4, pp. 213-17, October 1998.

It is important to note at this point that **Ireland**, which is the only European country that fluoridates the water of 75% of the country's citizens, has recently adopted the Scandinavian model to reach villages that are outside the areas of fluoridated water, as well as to target children from low socio-economic backgrounds for additional sterilization by topical intraoral fluoridation. The Irish dental health authority has developed draconian protocols to ensure that no one gets away and that there is *"an individual rinse record for every child, incident reporting, monitoring and evaluation, and information for participants on the maintenance of good oral health when the programme ends"*.[190]

The most compelling statistical evidence on the ravages of fluoridation on fertility comes from **Iran**, which is the only country in history to bring down its fertility rate from 6 children per woman to 2 in a single decade. That Iran fluoridates its water is a secret guarded not only by the Iranian government itself but by the international community as well. Not a single Western newspaper has reported Iran's nation-wide fluoridation of its tap and mineral water as well as that of its baby formula and powdered milk. Yet one need only read the academic submissions Iranian scientists have made to the 30th Conference of the International Society for Fluoride Research (which is to be held in Szczecin, Poland, September 5-8, 2012) to know that Iran is in the throng of a fluoridation mania.[191]

The fact that Israel, the West, Saudi Arabia (all of whom are Iran's sworn enemies) and every other country in the world keep Iran's secret and their mouths shut shows that on this matter they are tied at the hip and cannot point fingers lest they want to be lynched by their own people. It also shows that for countries around the globe the internal threat of population growth is a greater enemy than any external threat.

In the early 1980s Iran had one of the highest birth rates in the world at more than six children per woman and one of the most rapid rates of population growth in the world at 4.4%. As Iran's population surged, the government decided to change course in 1989 and by 1991 it had set up the Department of Population and Family Planning. By 1999, thus in merely ten years, the fertility rate dropped to less than two children per woman and by 2007 fertility rates were as low as those of Western Europe at just 1.7 children per woman both in the cities and in the countryside. No country in the world has achieved this in such a short time and certainly no country in the Middle East. In fact Iran is the only country in the Middle




[190] See p. 61 in *Topical Fluorides: Evidence-based guidance on the use of topical fluorides for caries prevention in children and adolescents in Ireland*, Irish Oral Health Services Guideline Initiative, 2008, http://ohsrc.html/guidelines.html.
[191] Abstracts submitted for the 30th Conference of the International Society for Fluoride Research, New Zealand, http://www.fluorideresearch.org/453Pt1/files/FJ2012_v45_n3Pt1_p151-216_sfs.pdf.

East with a TFR below replacement level.[192]

Iran achieved this drastic demographic transition by using both tap and bottled water fluoridation. It did so to pre-empt a resource crisis due to overpopulation. Its 79 million people make up half the total population of the Middle East, unemployment is at 22% and the youth bulge has not yet peaked. Despite its ultra-religious credentials, Iran decided to solve its population problem like most other countries (except China and India), by covertly waging chemical warfare on their people's reproductive systems. While there are no official figures on the sperm count of Iranian men, there are compelling figures on another country that has entered the fluoridation fray late in the game, Israel.

A recent study by Dr. Ronit Haimov-Kokhman shows a 40% decline in the concentration of sperm cells among the country's sperm donors from 2004 to 2008, compared to donors from 1995 to 1999. **Israel** began fluoridating the public water of Israeli citizens of Jewish descent in the 1990s (Arab Israelis have most likely been subjected to fluoridated water since the 1980s) and the effect on men's sperm count has been immediate. Haaretz, Israel's most important newspaper, reports:

> *The research confirmed that in 10 years, the average concentration of sperm among donors declined from 106 million cells per cubic centimeter to 67 million per cubic centimeter. The rate of sperm motility has also declined: from 79 to 67 percent, although the profile of donors did not change over that period; they are still young, healthy and do not smoke.*
>
> *According to Haimov-Kokhman, the quality of sperm has declined in most Western countries, but in Israel it has been particularly rapid.*
>
> *"If we keep going at this rate, a decline of 3 million cubic centimeters of sperm cells per year, we'll reach an average of 20 million in 2030. The World Health Organization defines this as fertility impairment."*
>
> *Studies showing a decline in sperm quality began to be published worldwide more than a decade ago, along with research indicating a rise in the rate of defects in the male reproductive system.*
>
> *In Israel, too, a study was published about a year ago, showing an increase of about 30 percent in defects in the male reproductive system. In addition, in the past decade, the number of cases of testicular cancer has doubled."*[193]

*Behavioral:*

One of modern history's great mysteries and something I have personally often asked myself is how was it possible that Jews did not resist the Germans and never lifted a hand to defend

[192] Keith Crane, Rollie Lal and Jeffrey Martini, *Iran's Political, Demographic, and Economic Vulnerabilities*, Project Air Force, RAND Corporation, 2008, http://www.rand.org/pubs/monographs/2008/RAND_MG693.pdf.
[193] Ofri Ilani, *Study: Quality of Israeli sperm down 40% in past decade*, 11 May 2009, http://www.haaretz.com/print-edition/news/study-quality-of-israeli-sperm-down-40-in-past-decade-1.275772.

themselves even when they knew that the gas chambers and furnaces awaited them? Now I know the answer. They were chemically subdued through water fluoridation. This explains why the Germans first gathered the Jews in ghettoes and segregated them before shipping them off to concentration camps. In the ghettoes, the water could be chemically treated with fluoride and only Jews would be drinking it. This allowed the Nazis to medicate/poison the Jews into a state of bovine submission without collaterally harming the German population before transporting them to the concentration camps where the fluoridation was continued at probably even greater concentrations than at the ghettoes.

Modern medicine describes this as fluoride fatigue. The clinical features of this illness, coined *chronic fluoride toxicity syndrome*, have been described by doctors Waldbott, Burgstahler and McKinney in their seminal work on the subject from 1978.[194]

They identified 21 symptoms of which the following concern behavior and the ability to defend oneself: chronic fatigue, not relieved by extra sleep or rest; headaches; aches and stiffness in the muscles and bones; muscular weakness; feeling of nausea, flu-like symptoms; loss of mental acuity and the ability to concentrate; depression; excessive nervousness; dizziness; tendency to lose balance; and diminished ability to focus.

The physiological mechanisms underlying these symptoms are several and complicated. They relate to fluoride's ability to:

1. form strong hydrogen bonds with amides and thus alter the shape of proteins and ultimately enzymes;
2. stimulate G-protein receptors and signalling pathways, which control the uptake of calcium into cells and the release of calcium from intracellular stores; processes involved in *"hormonal and immunological responses, transmission of nerve impulses, cell division and neoplastic transformations"*;
3. mimic the action of the thyroid stimulating hormone leading to hypothyroidism;
4. induce the release of excitotoxic aminoacids and the secretion of high levels of immune cytokines and other immune factors, which enhance excitotoxicity.[195]

All of these mechanisms affect the brain and degrade man's mental and physical faculties. In the first instance, amino acids from proteins are used to make neurotransmitters that allow brain cells to network and communicate. Neurotransmitters are the brain chemicals that motivate or sedate, focus or frustrate. In the second instance, a slew of vital processes are disturbed affecting the hormones that regulate mood and the body's ability to defend itself through a healthy immune system, as well as cellular health, the worst result being malignant brain tumors. In the third instance, hypothyroidism, the thyroid gland does not make enough hormones to control

[194] Waldbott G.L., Burgstahler A.W., McKinney H.L., Fluoridation: the great dilemma. Lawrence, Kansas: Coronado Press; 1978.
[195] Bruce Spittle, *Fluoride Fatigue. Fluoride poisoning: is fluoride in your drinking water – and from other sources- making you sick?* Paua Press, Dunedin, New Zealand, 2008, pp. 11-12, http://www.pauapress.com/fluoride/files/1418.pdf.

metabolism; leading to chronic fatigue, sadness, depression, and weakness, to name but a few symptoms. In the fourth and last instance, excitotoxicity, nerve cells are damaged or killed by their overstimulation through fluoride.

No wonder Jews could not do anything to defend themselves or their children! They were so severely poisoned with fluoride that they were utterly incapacitated. This also explains why their health deteriorated so quickly and why on average they only survived three months in concentration camps.[196] Prisoners of war in Japanese camps did not die in three months even though they were treated just as inhumanely and were subjected to starvation and physical abuse similar to that of Jews at the hands of their German captors. They were not however poisoned with fluoride. Compare that with the fighting spirit of today's Israelis who have one of the best armies in the world and probably the bravest secret service agency, the Mossad. Clearly Jews do not suffer from a deficit of courage or of physical abilities.

To subdue and control those who pose the greatest danger to the secular powers that delegate the chemical and biological war against us, all military bases in the US and Canada are fluoridated and I suspect in Australia and New Zealand too. It could very well be that all NATO countries fluoridate the water at their bases. As a rule of thumb, what America does so do all others within its sphere of influence. This is done deliberately to our soldiers to ensure that they are incapable of independent thinking and they do not disobey the chain of command.

Evidence of the devastating effect fluoridation has on human behavior and on our ability to think and act independently rather than follow blindly the system's constraints and commands, comes from all directions once you know where and what to look for.

Ever since Dr. Phyllis Mullenix published her research on the neurotoxicity of sodium fluoride, which showed that it causes attention deficit and hyperactivity like behavior in rats, it has been public knowledge that fluoride is highly damaging to the human brain and especially to males.[197] Boys are most affected by fluoridation which is why the male population is falling behind academically and why boys have so many more behavioral problems, learning difficulties, and incidence of attention deficit disorder, mental retardation, autism, and hyperactivity disorder than females; all of which we now know to be caused by fluoridation.

One in six children in the U.S. has a developmental disability, ranging from mild disabilities such as speech and language impairments to serious developmental disabilities, such as intellectual disabilities and autism.[198]

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[196] S. Steinbacher, Auschwitz (London, 2005); F. Piper, Mass Murder. Auschwitz 1940-1945 (Oświęcim, 2000); Orth, System; Hilberg,Vernichtung.

[197] Phyllis J. Mullenix, Pamela K. Denbesten, Ann Schunior & William J. Kernan, Neurotoxicity of Sodium Fluoride in Rats, Neurotoxicology and Teratology, Vol. 17, No. 2, pp. 169-177, 1995, http://www.scribd.com/doc/15945451/Neurotoxicity-of-sodium-fluoride-in-rats-Phyllis-J-Mullenix-Neurotoxicology-and-Teratology-Vol-17-No-2-pp-169177-1995.

[198] Data and Statistics on Autism Spectrum Disorder, Centers for Disease Control and Prevention, http://www.cdc.gov/ncbddd/autism/data.html.

In the U.S. 5.2 million children or 5% of the entire child population suffers from attention deficit and hyperactivity disorder (ADHD), an incidence rate that is 5 to 10 times higher than any other country[199], but only twice as high as that of Canada, which also fluoridates its water but to a lesser extent than the U.S. There are also 550,000 autistic children in the U.S. where the condition is 5 times more common in boys (1 in 54) than among girls (1 in 252), but is reported to occur in all racial, ethnic, and socio-economic groups.

The rate of occurrence in ethnic groups, however, reflects the level of fluoride exposure. Prevalence is significantly lower among Hispanic children than among non-Hispanic white children and significantly lower than among non-Hispanic black children.[200] That, of course, is the result of the fact that most Hispanics are newcomers to the U.S. and have not been exposed to fluoride for four generations like the white and black populations. The fact that blacks have higher prevalence than whites is the result of their lower-socioeconomic background, which means that they live in areas where the water is not only more likely to be fluoridated but also fluoridated at higher concentrations than in white neighborhoods.

The prevalence of developmental disabilities is on the rise throughout the world and mirrors the advance of fluoridation.

Soldiers suffer the greatest incidence of depression and suicide not only because they face scarring battle trauma, but also because they cannot escape fluoridation. Unlike the general population, who moves around and is therefore subjected to fluoridated water at times while at other times it is not, our soldiers are always forced to drink fluoridated water regardless of where they are in the world. The US military suicide rate is 15.8 per 100,000 whereas the civilian rate is only 10 per 100,000, thus significantly lower. Defense Department statistics show that 2,293 soldiers have taken their lives since 2001[201] and that 31% of them had never been deployed overseas and had not seen combat duty[202]. It is now recognized that military suicides are not necessarily linked to overseas deployments. What is yet to be recognized is that they are linked to water fluoridation, which makes the stress of war that much more unbearable. To put things in perspective, while 6, 139 soldiers died in combat between 2001 and 2011, an additional 2,293 soldiers died by suicide. The political leadership can live with these numbers because it is the only way to ensure their own safety from an awakened military that would turn its weapons against the leadership that drives so many soldiers to suicide through chemical poisoning by fluoride.

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[199] Julie A. Dopheide, *ADHD: Current Status of What We Know*, http://www.beachpsych.com/pages/cc34.html.
[200] Prevalence of Autism Spectrum Disorders – Autism and Developmental Disabilities Monitoring Netwrk, 14 Sites, United States, 2008, http://www.cdc.gov/mmwr/preview/mmwrhtml/ss6103a1.htm?s_cid=ss6103a1_w.
[201] Kristina Wong, *Rising Suicides Stump Military Leaders*, 27 September 2011, http://abcnews.go.com/US/rising-suicides-stump-military-leaders/story?id=14578134.
[202] Carrie Gann, *Suicides, mental Health Woes Soar Since Start of Iraq War, Study Finds*, 8 March 2012, http://abcnews.go.com/Health/study-80-percent-army-suicides-start-iraq-war/story?id=15872301.

It has been noted that such is the intellectual decline of the American population that graduate programs in the US would not survive without foreign students. The numbers confirm this. In 2006, 51% of the students in masters programs in U.S. universities were foreign nationals and 71% in PhD programs. Americans lack the IQ necessary to get into these graduate programs or to do well if they do get in.[203] The decline in intelligence affects more than just graduate programs in the U.S., it affects the entire national intelligence profile. Fewer citizens of high intelligence means decreased educational potential and lower economic productivity, which in the long run lead to social disintegration.[204] This dire picture applies of course to more than just the America; it applies to any and all countries that have embraced the fluoridation agenda. In the U.S. the numbers are the most revealing as the fluoridation policy has been in place the longest.

Social disintegration is inevitable in a society deprived of intelligent people as such societies will be incapable of making rational and intelligent decisions and will inevitably drive itself towards catastrophe. We see this throughout the American and indeed throughout the Western social and political landscape. A most revealing example was provided by the recent reform of America's medical insurance programs, where we saw the greatest opposition from the very people it was intended to benefit. This incomprehensible idiocy can only be understood when one realizes that the intelligence of the American people has been chemically degraded by 70 years of water fluoridation.

That fluoridation saps people's ability to fight for their own interests is seen elsewhere in the lack of social protest over the destruction of rights and liberties since 9/11. Instead of mass revolt we see a passive population that resembles cattle more than human beings and this is the same throughout the Western world because the entire population of the Western world is chemically poisoned and subdued by fluoridation and has been robbed of the will to fight.

The flip side of this phenomenon is that riots, significant protests and student protests have occurred only in non-water-fluoridated countries or cities. The Los Angeles riot of 1992, which lasted six days, took place in the city's pre-fluoridation days. To ensure this never happens again, Governor Pete Wilson signed a new state law in 1995 conditionally requiring fluoridation of any public water supply with at least 10,000 customers. Los Angeles has been fully fluoridated since 2003[205] and this, I believe, is already visible in the decline of quality in Hollywood's movies.

The Vancouver riot of 15 June 2011 over the home team's Stanley Cup loss to the Boston Bruins could not have happened if Vancouver were a fluoridated city, as neither could the London riots

[203] Michael Kanellos, *Why America needs foreign students*, 25 June 2007, http://news.cnet.com/8301-10784_3-9734099-7.html.
[204] Seymour W. Itzkoff, The Decline in Intelligence in America: A Strategy for National Renewal, Praeger 1994.
[205] Fluoridation at a Glance, Metropolitan Water District of Southern California, http://www.mwdh2o.com/fluoridation/fluoridationfactsheet.pdf.

of 6-10 August 2011 when the poor people of England finally snapped at the police repression and unprovoked killing of one of their own by out of control authorities.

The French riots of 2005 raged for a month from the suburbs of Paris to 15 urban areas until a state of emergency was declared and water fluoridation was certainly reintroduced to poison the population into a state of bovine submission. France had abandoned its policy of fluoridating bottled water in circa 1995 (judging by its TFR graph; see page 53) in order to boost its fertility rate which had reached an all-time low of 1.7 in 1992. It replaced fluoridated water with fluoridated salt but only 50% of France's salt is fluoridated and this gave the French the opportunity to regain their characteristic revolutionary spirit, which finally manifested itself in the 2005 riots.

As a last example I want to mention the Montreal student strike, which started in February and raged until the end of August 2012. Quebec students fought to prevent the provincial government from raising tuition fees and did so even after the criminal government of Jean Charet, the same man who has forced water fluoridation onto Quebecers, has outlawed the constitutionally protected right to strike. Mr. Charet will undoubtedly spend the rest of his days behind bars when this book comes out, if he is not lynched by the mob in his posh office.
The hypocrisy and criminality of the eugenicists is easily exposed once we have access to detailed data neighborhood by neighborhood for each fluoridated city. In the city where I lived until I had to go into exile, namely Kingston, Ontario, Canada, the east side is fluoridated while the west side is not. That is so because the east side has a military base whereas the west side is where the politicians live and the academics of Queen's University, who are all well aware of the toxic effect of fluoride and will not allow their children to be exposed to it. They have no problem poisoning the children of the poor as well as the soldiers and their families.

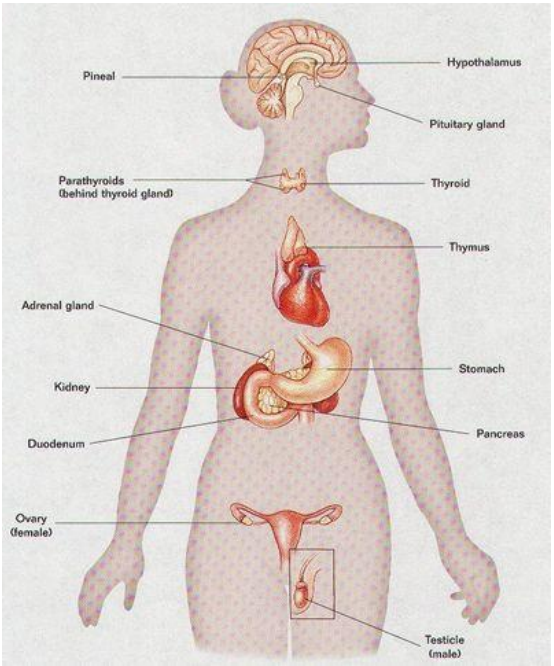
That governments and their "health" authorities should still insist on fluoridating water at great financial cost to taxpayers, against their will and despite the damage to their health, can only be explained by the hidden purpose of fluoridation, namely its usefulness for lowering fertility and controlling population growth, as well as the added bonus of rendering people obedient and pliable.

History is also replete with examples of how fluoridation was used for political purposes smaller than the overarching demographic objective of the global depopulation agenda. We have seen how Hong Kong and Singapore, who were under British colonial control, as well as Japan, who was under American control following the war, were the first countries in the world to be subjected to nation-wide water fluoridation schemes and have as a result suffered the steepest fertility declines. We have also seen that the Axis members were the first to be experimented on with fluoride. The motivation for subjecting these colonized or conquered people to water, salt and milk fluoridation was not only demographic but also political. Singapore and Japan provide perfect examples. Japan I have already discussed under indicator 2 on page 16. Let me now briefly discuss Singapore's fluoridation by its British colonial rulers.

It is no coincidence that Singapore's water was fluoridated starting in 1956. Singapore held its first general election in 1955 and it was won by pro-independence candidate David Marshall, leader of the Labour Front, who demanded complete self-rule from the British overlords and who immediately led a delegation to London where he was turned down. He resigned upon his return home and was immediately replaced by Lim Yew Hock, a British lapdog who did as he was told and started poisoning his people with fluoride to keep the political opposition under control. Lim Yew Hock was instrumental in suppressing the anti-colonial activists and communists. The first weapon he employed against political dissidents was fluoridated water and it worked. Singapore did finally manage to declare independence from the British in 1963, but it was fully on British terms and only once Britain was certain that Singapore would remain firmly under the British sphere of influence and will advance its interests in the region.

*General Health*

Fluoride is a recognized endocrine disruptor. The National Research Council has arrived at this rather obvious conclusion in 2006[206], but the eugenicists have known it since the 1940s. The disruptive influence of fluoride on human health through its impact on the endocrine system is therefore not inadvertent but intentional.




The endocrine system is made up of a series of glands that secrete various hormones directly into the bloodstream to regulate mood, growth and development, tissue function, metabolism, sexual function and reproductive processes. These hormones travel throughout the body, acting as chemical messengers. That is how the endocrine system allows the body to react to acute changes in cell metabolism.

The endocrine system influences every cell, organ and function of our bodies, being in charge of processes that take place slowly. Its main components are the hypothalamus, pituitary, and the endocrine glands – testis, ovary, thyroid, adrenals, and pancreas – each participating in numerous physiological processes.

[206] National Research Council. 2006. *Fluoride in Drinking Water: A Scientific Review of EPA's Standards*. National Academies Press: Washington, D.C., http://www.nap.edu/catalog.php?record_id=11571.

By disrupting the endocrine system, fluoride has an adverse effect on just about every part and function of the human body, impairing reproduction and development, the immune system, and the nervous system. Interfering with endocrine hormones before birth and during the developmental stages after birth causes damage that is permanent and irreversible to the reproductive, immune, and central nervous systems, which depend on these hormones for *"correct prenatal programming and postnatal function."* Furthermore, males seem to be more susceptible than females *"to perturbations in endocrine signaling during reproductive development, whereas both males and females are equally susceptible to alterations in behavioral development."*[207]

Estrogen, androgen, and thyroid hormones are the most important hormones secreted by the endocrine system. Estrogens are the group of hormones responsible for female sexual development and are produced primarily by the ovaries, while androgens (such as testosterone, which is produced by the testicles) are responsible for male sex characteristics.

The thyroid gland secretes two main hormones, thyroxine and triiodothyronine, into the bloodstream to stimulate all the cells in the body and control biological processes such as growth, reproduction, development, and metabolism. Thyroid disorders are among the most common of endocrine-related disorders. Disruption of the thyroid early in life has dire effects on behavioral development, reproductive development and immunity and explains the physiological mechanisms by which fertility and intelligence are undermined:

BRAIN DEVELOPMENT AND FUNCTION

> *"Thyroid hormones also act on most parts of the adult and developing brain, and appear to act as each part of the brain passes through a specific developmental window. All these hormones modulate the differentiation of neurons by affecting cellular migration, death, and synapse formation and pruning. These fundamental changes in cellular structure impact neuronal function, and thus overall central nervous system output."*

REPRODUCTIVE ORGANS

> *"Altered thyroid hormone homeostasis (either hypo- or hyperthyroidism) during male sexual development can result in altered testicular development, and as a result, quantitatively altered spermatogenesis at adulthood.*
>
> *In both males and females, differentiation of the reproductive organs continues throughout gestation, while reproductive maturation (e.g., masculinization of external genitalia, anogenital*

[207] John C. O'Connor and Robert E. Chapin, Critical evaluation of observed adverse effects of endocrine active substances on reproduction and development, the immune system, and the nervous system. *Pure Appl. Chem.*, Vol. 75, Nos. 11–12, pp. 2099–2123, 2003, http://www.iupac.org/publications/pac/2003/pdf/7511x2099.pdf.

*distance, behavioral development) continues throughout the first few weeks of postnatal life until puberty, which is under hormonal control (i.e., androgen-dependent in males and estrogen-dependent in females).*

*After puberty, processes such as spermatogenesis or ovarian function remain under hormonal control. Perturbations in the endocrine-signaling pathways during development lead to very distinct developmental abnormalities.*

*While sustained alterations in hormonal homeostasis at any point during life can result in adverse effects…, even small transient alterations in hormonal homeostasis during development can be detrimental since the developing organism is uniquely sensitive to hormonal perturbations. The inherent sensitivity of the fetus is due to the reproductive and behavioral "programming" that occurs during development of the endocrine system in the fetus and neonate. Even small perturbations in the endocrine axes during this period of development may result in permanent alterations in the way the affected cells respond to hormones at any time in the future. Thus, there may be lasting impacts on the reproductive and/or behavioral capacity of the animal."*[208]

I have already discussed in previous sections some of the neurological defects and impairments associated with fluoride, as well as the incidence of infertility. What I have not mentioned is that Alzheimer's, Down syndrome, cerebral palsy, chronic fatigue syndrome, dementia, dyslexia, epilepsy, motor skills disorder, panic disorder, Parkinson's disease, Tourette syndrome, and dozens of other neurological illnesses are caused in part or in whole by fluoride exposure.

What I have also not mentioned are the many sex hormone disorders fluoride has a hand in: disorders of sex development (hermaphroditism, gonadal dysgenesis, androgen insensitivity), acquired sex disorders (ovarian failure or premature menopause, testicular failure), disorders of gender (gender identity disorder), disorders of puberty (delayed puberty, precocious puberty), menstrual function and fertility disorders (amenorrhea, polycystic ovary syndrome).

The greatest impact of fluoride on sexuality, however, is to be found in the increased prevalence of gender identity issues, if the hormonal theory of sexuality is to be given any credence. This theory holds that prenatal factors that interfere with the interaction of certain fetal hormones on the developing brain play a role in fetal sex differentiation, which in turn influences the sexual orientation that emerges later in adulthood.[209] The endocrine disrupting effect of fluoride and other environmental toxins (such as bisphenol A) on the development of sexual organs described above certainly supports the hormonal theory of sexuality. In addition, statistical data supports the conclusions reached by these studies.

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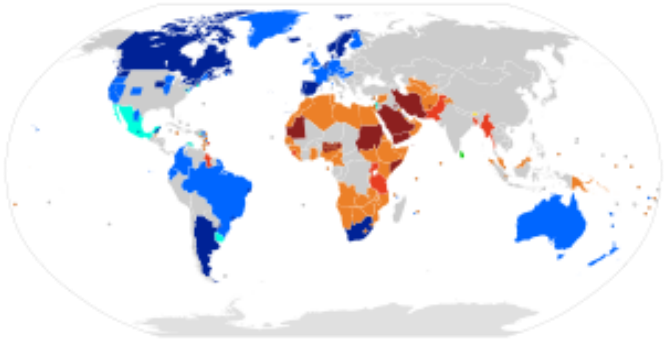
[208] John C. O'Connor and Robert E. Chapin, Critical evaluation of observed adverse effects of endocrine active substances on reproduction and development, the immune system, and the nervous system. *Pure Appl. Chem.*, Vol. 75, Nos. 11–12, pp. 2099–2123, 2003, http://www.iupac.org/publications/pac/2003/pdf/7511x2099.pdf

[209] Garcia-Falgueras A, Swaab DF., Sexual hormones and the brain: an essential alliance for sexual identity and sexual orientation. *Endocr Dev*. 2010; 17:22-35, http://www.ncbi.nlm.nih.gov/pubmed/19955753.

Judging by the higher prevalence of lesbian, gay, bisexual and transgender (LGBT) individuals in Western countries than elsewhere in the world, and by what appears to be an even greater prevalence of LGBT in Anglo-Saxon countries, which have been subjected to water fluoridation longer than countries in continental Europe, the hormonal theory of sexuality seems to be right.

The inquiring minds will challenge my assumptions by pointing out that there are no accurate global statistics on the prevalence of LGBT. And because this is the case, I bring in supporting data from other sources, namely the legality of gay marriages and gay rights, and the percentage of childless women, from which we can infer more accurately the statistical differences in LGBT incidence.

The countries that recognize gay marriage and gay rights to various degrees are the water fluoridating countries of the Americas: Canada, parts of the US, Brazil, Argentina, Columbia, Uruguay and Mexico), as well as Ecuador, which is the only exception as it does not have a water fluoridation program or at least not an official one. On the African continent, South Africa is the only country that recognizes gay rights and is also the only country in Africa with an official water fluoridation policy. In the South Pacific, Australia, New Zealand and Fiji are the only water fluoridating countries and also the only countries to recognize gay rights. The remaining countries that respect gay rights are in Western, Central and Northern Europe, all of which have either salt fluoridation (France, Germany, Austria, Czech Republic, Hungary), tap water fluoridation (Ireland, UK, Spain), bottled water fluoridation (France, Belgium, Spain), or dental/systemic fluoridation programs (the Netherlands, Denmark, Norway, Sweden, and Finland).



Blues indicates that homosexual acts are legal (the darker the blue the greater the rights) while reds indicate that homosexual acts are illegal (the darker the red the greater the penalty).

While this is by no means conclusive evidence that respect for gay rights and fluoridation go hand in hand, or vice versa, it does seem to suggest that governments that do force fluoridation on their people are more sensitive to gay rights because they are aware that by doing so they increase LGBT prevalence. This makes them feel responsible and therefore prompts governments to protect LGBT individuals from prejudice by adopting gay rights legislation. Such legislation is also self-serving, because by increasing tolerance and acceptance for LGBT,

the eugenicists are also aiding their depopulation agenda and preventing scientific scrutiny of the underlying causes of gender identity issues. If people feel it is OK and it is normal to be gay, lesbian, bisexual or transgender, then they will not question and lament their inability or decreased ability to have families of their own and children. The main objective of the eugenicists, after all, is to prevent as many people as possible from having children. And this brings us to the second batch of statistics that give us a more accurate idea of the true incidence of LGBT and indirectly of the damage done to the reproductive opportunities of individuals subjected to fluoridation.

Voluntary childlessness in women is defined *"as women of childbearing age who are fertile and do not intend to have children, women who have chosen sterilization, or women past childbearing age who were fertile but chose not to have children."*[210]

While there are many reasons why women who are physically capable of having children choose not to (i.e. fear of passing down genetic disorders, career ambitions, social attitudes to remaining childless, etc.), a large proportion of them remain childless because they are lesbian. This is suggested by the fact that the chance of being childless was far greater for women who were never married (82.5%) than for women who were married (12.9%). So it is not unreasonable to estimate that the vast majority of the women who choose not to have children do so because they are prevented from having children by their sexual orientation rather than by social and economic factors. In any case, a 2003 U.S. Census study found that 19% of American women age 40-45 did not have children, compared to only 10% in 1976. The 2004 figure was nearly the same as in 2003, at 18.4%. The 18.4% figure becomes very revealing when it is split by race, in which case it shows that 20.6% of white women were childless, 17.2% of black women, 15.9% of Asian women and 12.4% of Hispanic women.[211] Given that Asian and Hispanic women are more likely to be newcomers to the U.S. than white and black women, it makes sense to conclude that the higher incidence of childlessness in white and black women as opposed to Asian and Hispanic women is the result of their shorter exposure to fluoridated water and therefore to lower percentages of gender identity and infertility issues.

Overall, 6% of the U.S. population of childbearing age is shut out of the reproductive chain by infertility issues and an additional 19% by a combination of factors of which gender issues that have been caused in part or in full by exposure to fluoride is a main consideration. The two figures undoubtedly overlap, and we can therefore estimate childlessness in 20% of the female population to be a reasonable figure.

The U.S. figure mirrors that of other developed countries such as England, Germany and the Netherlands, where 1 in 5 women remains childless just as in the U.S., and who have also been fluoridating their citizens for decades. In Italy and Switzerland, also heavily fluoridated

[210] Childfree, Wikipedia article, http://en.wikipedia.org/wiki/Childfree.

[211] Children Ever Born per 1,000 Women, Percent Childless, and Women Who Had a Child in the Last Year by Race, Hispanic Origin, Nativity, 2004. U.S. Census Bureau, http://www.census.gov/population/socdemo/fertility/cps2004/tab03-05.xls.

countries, the situation is even worse and 1 in 4 women remains childless. By comparison, in India, which is one of the few countries in the world that has not fluoridated its population, only 1 in 30 women remains childless. And in countries that have introduced fluoridation late – such as Indonesia, Pakistan, South Africa and Turkey – and where its effects on fertility are yet to be felt in the proportion of women who remain childless, only 1 in 20 women is without child.[212]/[213] These striking differences between non-fluoridated/late fluoridated and fluoridated countries speaks volumes about the devastating effect of fluoride on fertility.

These striking differences have very little to do with socio-economic indicators, female education levels and delaying the first pregnancy, as the demographers working overtime for the eugenicists are trying to make us believe. They are, pure and simple, the tragic result of the toxic effect of fluoridation.

I realize that this is a somewhat circuitous way to show that fluoridation is largely responsible for shutting down up to 20% of the genetic lines exposed to fluoride in every generation. However, in the absence of data and research on the prevalence and causes of LGBT and infertility – both of which are deliberately suppressed in order to hide fluoride's culpability – this is all we have to go on at this time. Throughout this book I state that the eugenicists have rendered infertile and caused the extinction of 30% of the genetic lines exposed to fluoridation in one form or another. I have arrived at this figure by considering that three generations have so far been exposed to the sterilizing effects of fluoride and have ascribed only half of the overall infertility rate of 20% per generation to fluoride, a conservative estimate; therefore, 10% infertility per generation x 3 generations = 30%. In numerical terms this works out to approximately 300,000 million genetic lines that have been wiped off the face of the earth.

## IMMUNE SYSTEM

As an endocrine disruptor fluoride causes aberrant reactions of the immune system and can render it either hyperactive or repressed, each with disastrous consequences. The former results in autoimmune disease and allergies while the latter exposes the body to viral attacks and cancers.

Autoimmune disease makes the immune system hypersensitive causing it to respond inappropriately to normal substances and tissue present in the body and to mistake them as pathogens and attack its own cells. Autoimmune disease is responsible or suspected for dozens of diseases, the most common of which are: alopecia; hepatitis; anemia; pancreatitis; dermatitis; celiac disease; diabetes mellitus type1 and type 2, as well as gestational diabetes and mature onset diabetes of the young; Crohn's disease; chronic obstructive pulmonary disease, Lupus

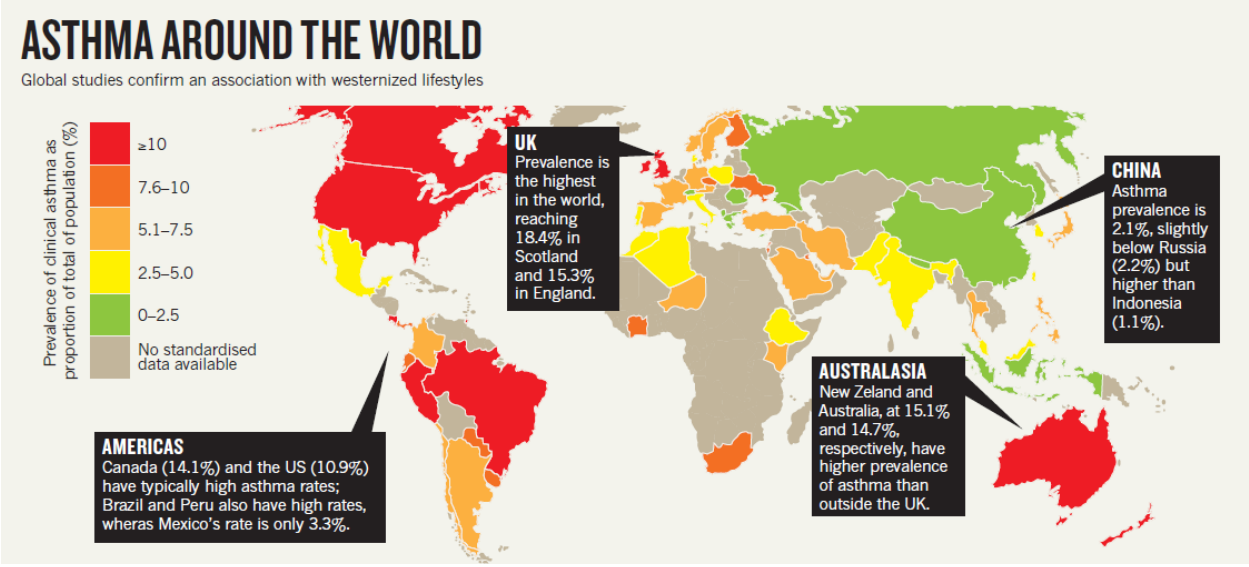
[212] Childless by Choice, Yale Center for the Study of Globalization, http://yaleglobal.yale.edu/content/childless-choice.
[213] Infecundity, infertility, and childlessness in developing countries. Demographic and Health Surveys (DHS) Comparative reports No. 9, http://www.who.int/reproductivehealth/topics/infertility/DHS-CR9.pdf.

erythematosus, narcolepsy, biliary cirrhosis, psoriatic arthritis, rheumatoid arthritis, rheumatic fever, schizophrenia. Millions of people are affected and suffer a life of illness while our leaders continue to poison us.

Hyperactivity and hypersensitivity of the immune system caused by fluoride and other endocrine disruptors often result in exaggerated immune responses that we have come to know as allergies. Allergies were a foreign concept in the West in the first half of the 20th century, the un-fluoridated half, but have become endemic in the second half of the 20th century, the fluoridated half. Allergies are still almost unheard of in third world countries, which have been spared from fluoridation by their poverty and lack of infrastructure. The dramatic increase in allergies found in industrialized societies has everything to do with people's chronic exposure to fluoride, which is the only toxic substance that we are forced to continuously ingest with our water.

Allergic symptoms directly related to fluoride have been identified as early as the 1950s and 1960s when researchers noted atopic dermatitis, urticaria, epigastric distress, emesis, and headaches in pregnant women who took fluoride pills.[214] Allergies caused indirectly by fluoride's effect as an endocrine disruptor are yet to be properly recognized and cover the whole gamut from asthma, to food allergies, to otitis, to hay fever. Fluoride clearly contributes to a predisposition to allergies.

A simple glance at the world's asthma hotspots reveals that they are the same as the countries that are water fluoridated in the first place and salt fluoridated in the second.


ASTHMA AROUND THE WORLD
Global studies confirm an association with westernized lifestyles
Prevalence of clinical asthma as proportion of total of population (%)
≥10
7.6–10
5.1–7.5
2.5–5.0
0–2.5
No standardised data available
UK
Prevalence is the highest in the world, reaching 18.4% in Scotland and 15.3% in England.
CHINA
Asthma prevalence is 2.1%, slightly below Russia (2.2%) but higher than Indonesia (1.1%).
AUSTRALASIA
New Zeland and Australia, at 15.1% and 14.7%, respectively, have higher prevalence of asthma than outside the UK.
AMERICAS
Canada (14.1%) and the US (10.9%) have typically high asthma rates; Brazil and Peru also have high rates, wheras Mexico's rate is only 3.3%.

Canada, the U.S., Brazil, Ireland, New Zealand and Australia are all heavily water fluoridated countries and also red hot on the world asthma map above. In Europe, the British Isles, which

[214] Feltman, R. and Kosel, G.: Prenatal and Postnatal Ingestion of Fluorides - Fourteen years of Investigations - Final Report. *Journal of Dental Medicine*, 16:190-199, 1961, http://www.slweb.org/feltman-kosel.1961.html.

are fluoridated to various degrees, are also red hot, while the salt or salt and water fluoridated countries of continental Europe are orange. Ukraine, the Czech Republic and Finland, all of which are undergoing new waves of fluoridation are deep orange. In the Middle East, Saudi Arabia, the United Arab Emirates, Kuwait, Iran, Turkey and Israel are all orange due to the fact that they are in a fluoridation frenzy by various methods. In Africa, South Africa and the Ivory Coast are deep orange, as they have recently introduced water fluoridation. Kenya and Niger are light orange which probably means they use fluoridated water in the large cities, fluoridated salt throughout the country and probably also fluoridated bottled water. Ethiopia and Algeria, are yellow, denoting some form of partial fluoridation. In Asia, Pakistan, Afghanistan, Malaysia and South Korea are yellow, as they have newly adopted fluoridation programs. Thailand, the Philippines, Japan are orange since they have long-standing fluoridation programs in place. India is yellow due to the high level of air pollution derived from the common practice of burning cow dung as cooking fuel. India is one of the very few countries in the world where the government has been honorable and has protected its citizens from the western initiated mass murder by fluoridation program. In the South Pacific, Australia and New Zealand, both heavily water fluoridated, are deep red with asthma.

The lower prevalence of asthma in Russia is to be attributed to the discontinuation of the fluoridation policy in 1990, as Russia's TFR had plummeted to such an extent as to require revitalization less the Russian people would become extinct. China's lower level of asthma is due to its relatively new fluoridation programs. As previously discussed, China has relied on the one-child policy to keep its population growth under control and it is only recently that it has adopted milk fluoridation, but not to a statistically significant degree. China is grossly polluted and the incidence of asthma is the result of bad air rather than fluoridated water, milk or salt.

The asthma map reflects the age and extent of fluoridation quite accurately.

METABOLISM

Fluoride's endocrine disrupting effect is felt also in the malfunctions of the metabolic system, obesity and diabetes being the primary manifestations of such malfunction. Obesity and diabetes have become the diseases of our time, but have yet to be recognized for what they are.

Together with cardiovascular disease they form what is known as metabolic syndrome, which affects 25% of the American population and similarly the populations of other water fluoridated countries and to a somewhat lesser extent the populations of salt fluoridated countries.

The triad of obesity, diabetes and cardiovascular disease is by far the leading cause of death in the developed and increasingly the underdeveloped world where fluoridation is carving its deadly inroads.

In the United States obesity alone is estimated to cause an excess of 300,000 deaths per year while in Europe 1 million deaths are attributed to it annually.[215] That obesity is not a disease of wealth but rather of one of poverty most clearly shows that its cause is not gluttony or the consumption of bad foods but the metabolic chaos fluoride causes in the human body. The poor, who are at the first targets of fluoridation and the least likely to have the knowledge necessary to defend themselves against poisoned water, salt and milk, are far more likely to be obese than the wealthy. Another telltale sign is that the rate of obesity in the developing world is much higher in the cities, where the water is fluoridated, than in the countryside, where it is not. In China, for instance, overall rates of obesity are below 5%; but in the cities the rates of obesity are greater than 20%.[216] Another clear indication that obesity is the result of fluoridation comes from cognitive epidemiological data, which confirms that obesity is associated with cognitive deficits.[217]/[218] As I have shown, fluoride damages metabolism and intelligence at the same time.

The connection between poverty and greater fluoridation exposure carries over into statistics about diabetes. The World Health Organization reports that in 2004 there were 346 million people worldwide with diabetes and 3.4 million of them died from consequences of high blood sugar. More than 80% of diabetes deaths occur in low- and middle-income countries. More than 80% of diabetes deaths occurred in low- and middle-income countries and the number is projected to double between 2005 and 2030[219], as fluoridation advances and/or the damage becomes cumulative from one generation to the next.

The diabetes statistics are equally frightening. In the U.S. alone there are 26 million people with diabetes (8.3% of the population) in addition to which there are an estimated 80 million who have pre-diabetes. The number of diabetes sufferers has increased from 1.5 million in 1958 to 25 million in 2010.[220]

The medical knowledge and statistics I presented above, however, do not prevent our governments and health authorities from forcing fluoride-poisoned water, salt and milk onto us and our children, whose health, intellect and reproductive organs are as a result damaged for life.

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[215] Constantine Tsigosa, Vojtech Hainer, Arnaud Basdevant, Nick Finer, Martin Fried, Elizabeth Mathus-Vliegen, Dragan Micic, Maximo Maislos, et al. (April 2008), Management of Obesity in Adults: European Clinical Practice Guidelines, *The European Journal of Obesity* **1** (2): pp. 106-16, http://www.gojaznost.org/gs/dodatak/OMTFManagementofObesityinAdults2008.pdf

[216] *Obesity and Overweight*, World Health Organization, http://www.who.int/dietphysicalactivity/media/en/gsfs_obesity.pdf.

[217] Gunstad J., Paul R.H., Cohen R.A., Tate D.F., Gordon E., Obesity is associated with memory deficits in young and middle-aged adults, *Eat Weight Disord*. 2006 Mar;11(1):e15-9, http://www.ncbi.nlm.nih.gov/pubmed/16801734

[218] Philip A. Wolf, Alexa Beiser, Merrill F. Elias, Rhoda Au, Ramachandran S. Vasan, Sudha Seshadri, Relation of Obesity to Cognitive Function: Importance of Central Obesity and Synergistic Influence of Concomitant Hypertension. The Framingham Heart Study, *Current Alzheimer Research*, Volume 4, Number 2, April 2007, pp. 111-116(6), http://www.ingentaconnect.com/content/ben/car/2007/00000004/00000002/art00004.

[219] *Fact sheet N°312*, Diabetes facts, WHO, http://www.who.int/mediacentre/factsheets/fs312/en/index.html.

[220] *The facts about diabetes: A leading cause of death in the U.S.,* National Diabetes Education Program, http://ndep.nih.gov/diabetes-facts/index.aspx.

Most criminally, our authorities have always known that fluoride is a poison which damages our bodies at the cellular level. Pre-fluoridation scientific literature exposes this knowledge clearly and unequivocally. In September 1943 the American Medical Association (AMA) wrote:

> *"Fluorides are general protoplasmic poisons, with the capacity to modify the metabolism of cells by inhibiting certain enzymes. Sources of fluorine intoxication include drinking water containing 1ppm or more of fluorine."*[221]

Not to be outdone, the American Dental Association (ADA) wrote in October 1944:

> *"Drinking water containing as little as 1.2 ppm fluoride will cause developmental disturbances ... We cannot run the risk of producing such serious systemic disturbances. In light of our present knowledge of the chemistry of the subject, the potentialities for harm outweigh those for good."*[222]

The publications of today's criminally dishonest eugenicists who pose as scientists and lead our health authorities and state institutions could not be more diametrically opposed to their earlier brethren, or their current rank and file scientists for that matter, who performed and perform their professional duties with our health and not our death in mind. Take as an example the 2006 publication by a committee of hand-picked eugenicists of the National Research Council, which is a private organization that has nothing to do with science and everything to do with mass murder, and who gave fluoridation a clean bill of health and dismissed any and all research that finds fault with fluoride.[223]

Equally complicit in the eugenic agenda and just as fraudulent is the 2005 publication of the American Dental Association in celebration of 60 years of water fluoridation.[224]

While singing the praises of fluoride, the criminals in charge of our countries and of our institutions are using covert methods to increase the endocrine disrupting effect of fluoride. They do this in two ways: bottles made with bisphenol A and aluminum aerosol spraying; the first method being intended to increase the sterilizing effect of fluoride and thus act on the front end of population control, fertility, while the latter is intended to increase damage to the brain, immunity and metabolism and thus act on the back end of depopulation, mortality.

BISPHENOL A

I have discussed bisphenol A in a previous section, Indicator 8 (pages 58-62), to show why it is used to make plastic bottles and will only add here research about its role as an endocrine disruptor and what this means for sexual behavior.

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[221] Journal of the American Medical Association, September 18, 1943. Cited by Valdamar Valerian, *Behavioral Effects of Fluorides on Mass Populations*, 3 February 1997, http://mizar5.com/behavioraleffect.html.
[222] Journal of the American Dental Association, Editorial, October 1, 1944. Cited by Valdamar Valerian, *Behavioral Effects of Fluorides on Mass Populations*, 3 February 1997, http://mizar5.com/behavioraleffect.html.
[223] Fluoride in Drinking Water: A Scientific Review of EPA's Standards, Committee on Fluoride in Drinking Water, National Research Council, 2006, http://www.nap.edu/catalog.php?record_id=11571.
[224] Fluoridation Facts, American Dental Association

As an estrogenic endocrine disruptor, bisphenol A interferes with the process of sexual differentiation of brain and behavior. Developmental exposure to it was shown to have long-term consequences on these aspects of neurobehavioral development.[225]

When administered to rats during gestation and lactation, bisphenol A was shown to demasculinize males in measures of affect.[226]

Another study examined the *"effects of prenatal exposure to bisphenol A (0.1 ppm in drinking water applied to pregnant rats during the final week of pregnancy) on emotional and learning behaviors in addition to exploratory behavior. Estimated daily intake was 15 microg/kg/day, below the reference dose (RfD) in the United States and the daily tolerable intake (TDI) in Japan (50 microg/kg/day)."* The study found *"that male rats at the final week of prenatal period are sensitive to BPA, which impairs sexual differentiation in rearing and struggling behavior and facilitate depression-like behavior."*[227]

These animal study results show that bisphenol A confuses the proper development of sexual differentiation in the brain and explains the increasing prevalence of gender identity issues as well as depression in humans. The majority of our gay, lesbian, bisexual and transgender sons and daughters are therefore victims of the 60-year-old chemical war governments have been waging against us. This knowledge I hope will allow even the most prejudiced among us to be tolerant and loving towards those whose normal sexual development has been chemically sabotaged in the name of the depopulation agenda.

Evidence of the damage done by endocrine disruptors bisphenol A and fluoride to normal sexual development comes also from statistics on teen suicides, which show that gay, lesbian and bisexual teens are five times more likely to commit suicide than heterosexual teens[228] and that this high level of suicide has nothing to do with stigmatization or lack of support.[229] It has everything to do with the fact that bispehnol A and fluoride disrupt sexual differentiation of the locus coeruleus, which is the part of the brain that is also involved with physiological responses to stress and panic, which is why GLBT youngsters are far more likely to be depressed and consequently five times more likely to commit suicide.

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[225] Gioiosa L, Fissore E, Ghirardelli G, Parmigiani S, Palanza P., Developmental exposure to low-dose estrogenic endocrine disruptors alters sex differences in exploration and emotional responses in mice. Horm Behav. 2007 Sep; 52(3):307-16, http://www.ncbi.nlm.nih.gov/pubmed/17568585.

[226] Jones B.A., Watson N.V., Perinatal BPA exposure demasculinizes males in measures of affect but has no effect on water maze learning in adulthood. Horm Behav. 2012 Apr;61(4):605-10, http://www.ncbi.nlm.nih.gov/pubmed/22370244.

[227] Fujimoto T, Kubo K, Aou S., Prenatal exposure to bisphenol A impairs sexual differentiation of exploratory behavior and increases depression-like behavior in rats. Brain Res. 2006 Jan 12; 1068(1):49-55, http://www.ncbi.nlm.nih.gov/pubmed/16380096.

[228] Jennifer Welsh, Homosexual Teen Suicide Rates Raised in Bad Environments, LiveScience, 18 April 2011, http://www.livescience.com/13755-homosexual-lgb-teen-suicide-rates-environments.html.

[229] David Shaffer, Prudence Fisher, R. H. Hicks, Michael Parides, Madelyn Gould, Sexual Orientation in Adolescents Who Commit Suicide, The American Association for Suicidology, Volume 25, Issue Supplement s1, pages 64–71, Winter 1995, http://onlinelibrary.wiley.com/doi/10.1111/j.1943-278X.1995.tb00491.x/full.

The lower concentration of fluoride in bottled water is complemented in its toxicity by the material from which plastic water bottles are made, namely bisphenol A. Half the toxicity needed to damage our health to the extent the eugenicists desire comes from the fluoride dumped in the water and the other half from the bisphenol A that leeches from the plastic bottles into the water contained therein. Between the two of them the toxicity of bottled water is the same as or greater than the toxicity of fluoridated tap water or fluoridated salt. This methodology was undoubtedly invented to reach areas that have resisted the fluoridation of the municipal water and regions where tap water is unsafe to drink, as in Mexico, and where people rely on bottles water.

It was also devised to reach the population of Muslim countries in the Middle East where water is too rare and precious to be poisoned and where all drinking water comes from a bottle and is imported from the West where the poisoning can be done by trusted members of the eugenic agenda and the sheiks of the wealthy Arab states can feign ignorance if and when they are caught and they must face the wrath of their people.

This also explains why all or nearly all aluminum cans, be they for beverages or for canned foods, are lined with bisphenol A when there is no industrial need for it. They are lined with it to deliberately increase our environmental exposure to an endocrine disrupting agent that the eugenicists have designed specifically for the purpose of damaging our health to increase both our infertility and morbidity. More than this, they designed it to leach easily. A recent study done by Harvard University showed that the urinary level of bisphenol A spiked 1200% in just five days in people who eat canned soup.[230]

The dental profession, as always, is doing its part in the eugenic agenda by putting fillings in our children's mouths that leach bisphenol A.[231]

## AEROSOLIZED ALUMINUM

The second method of enhancing the endocrine disrupting effects of fluoride is through the aerial spraying of aerosolized aluminum, which for the past ten years has taken place under the greatest level of secrecy, but which recently, due to vociferous complaints by civil rights activists, the government of the U.S. explains is an experimental measure to protect the environment by slowing down global warming, a phony science dubbed geo-engineering. The official rationale is that by releasing highly reflective aluminum particles in the stratosphere sunlight is reflected and global warming slowed down. This, of course, is a rationale that can be deflated by a five-

[230] Jenny L. Carwile, Xiaoyun Ye, Xiaoliu Zhou, Anotonia M. Calafat, Karin B. Michels, Canned Soup Consumption and Urinary Bisphenol A: A Randomized Crossover Trial, *JAMA*, JAMA, 2011 Nov 23; 306 (20):2218-20, http://www.ncbi.nlm.nih.gov/pubmed/22110104

[231] Marc A. Gauthier, Zhao Zhang, X. X. Zhu, New Dental Composites Containing Multimethacrylate Derivatives of Bile Acids: A Comparative Study with Commercial Monomers, *ACS Appl. Mater. Interfaces*, 2009, *1* (4), pp. 824–832, http://www.ncbi.nlm.nih.gov/pubmed/20356008

year-old, by simply pointing out that these particles do not stay in the atmosphere but come down. Serious scientists have already discounted the viability of geoengineering.[232]

The powdered aluminum oxide is sprayed from planes flying at high altitudes and equipped with special devices that release it in trails that look like normal condensation trails, also called contrails, but unlike them do not dissipate in a few seconds. They have been dubbed *chemtrails*. The planes fly in criss-cross patterns to cover as large an area as possible continuously releasing aluminum over our heads. The aerosolized aluminum eventually comes down and settles on the land in very high concentrations. To ensure that the aluminum contaminates as large an area as possible, the authorities are spraying over basins with large water reservoirs or with mountains that feed many waterways with melted snow water. Activists have collected snow samples from Mt. Shasta in California, for example, and had them chemically tested. The analysis showed astronomical levels of aluminum with traces of barium and strontium that broke the legal limits by thousands of times.[233] No one has been able to explain why they would be spraying a toxic metal in industrial quantities over our heads and no one has been able to receive an answer from the authorities despite repeated requests.

The answer, however, is simple and rather obvious. Aluminum binds with fluoride to form aluminum fluoride compounds that greatly increase fluoride toxicity, therefore reducing the human body's toxicity threshold levels previously thought safe. In other words, you can do far more damage to human health with aluminum fluoride than you can do with just fluoride and you need less of it. If the environment is contaminated with aluminum and fluoride is forced on us through the water we drink, aluminum fluoride compounds can form outside our bodies, in food and drinking water, and inside our bodies. Aluminum is very reactive and binds easily with fluoride.

The aluminum fluoride combination is very toxic and has been shown to be instrumental in Alzheimer's disease.[234] The intent of the aluminum spraying program is to increase the prevalence of neurological disorders and therefore lower our lifespan. It is, in other words, an attempt to trim humanity not from the front end of life but from the back end by increasing morbidity (i.e. sickness) and thus ultimately increasing mortality (i.e. death rate).

Chemtrails have been observed only over NATO countries and this suggests that the aluminum poisoning program is carried out by NATO forces with full cooperation from member states. While the authorities deny this, official documents tell another story. The 2001 David Kussinic

[232] Alan Robock, 20 Reasons why geoengineering may be a bad idea, Bulletin of the Atomic Scientists, May/June 2008, http://www.thebulletin.org/files/064002006_0.pdf
[233] What in the World are They Spraying, http://www.youtube.com/watch?v=jf0khstYDLA.
[234] Strunecká A., Patocka J., Aluminum and fluoride: a new, deadly duo in Alzheimer's Disease, *Cesk Fysiol* 48 (1):9-15 (1999).

initiated congressional bill H.R. 297, also called the Space Preservation Act, clearly lists chemtrails as an *"exotic weapons system"* used to *"expel chemical or biological agents"*.[235] The bill, needless to say, was buried since now more than ever our governments need weapons of mass destruction to murder us efficiently.

Aluminum, fluoride and chemtrails intersect in yet another way, as the aluminum resistant gene patent # 7582809, filed in 2009 with the U.S. Patent Office, indicates.[236] This patent claims intellectual property rights to an aluminum tolerant gene designed to allow genetically modified organisms to thrive in aluminum poisoned soils; in other words, in soils poisoned by NATO's chemtrail operations to make it impossible for traditional and organic farmers to grow natural world and heirloom native seeds. The aluminum spraying operation therefore has multiple purposes: (1) to increase the toxicity of fluoride and make it a more potent endocrine disrupting agent, (2) to displace traditional farmers by driving them into bankruptcy and (3) to replace natural seeds with genetically modified organisms that, as you are about to read in this book, are the newest weapon of mass destruction in the deadly arsenal of our elected governments.

The aluminum resistant gene invention, incidentally, comes from Cornell University researchers funded by the National Science Foundation (located in Arlington, Virginia, close to the Pentagon) and two private organizations supported by the Bill and Melinda Gates Foundation, which is deeply involved in eugenic programs throughout the world.[237] More than this, the patent was assigned to the U.S. Department of Agriculture and the Brazilian Enterprise for Agricultural Research, which are the American and Brazilian front organizations for state-sponsored mass murder through genetically modified crops.

We are being sprayed with toxic chemicals and forced to drink toxic chemicals for one and one reason only, to eradicate as many of us. However you look at fluoridation and its secondary programs there is only one conclusion you can draw. Even though there is no need for fluoride at all for human health it is being forced on us with the intent to obliterate our genetic lines. We are being eviscerated through conscious chemical warfare in a silent war that has claimed more lives than all wars in human history put together.

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[235] Rep. Dennis Kucinich [D-OH10]. Space Preservation Act 2001 (2001: 107th Congress H.R. 2977), GovTrack.us, http://www.gpo.gov/fdsys/pkg/BILLS-107hr2977ih/pdf/BILLS-107hr2977ih.pdf.

[236] U.S. Patent # 7,582,809, September 1, 2009, US Patent Office, http://patft.uspto.gov/netacgi/nph-Parser?Sect1=PTO2&Sect2=HITOFF&p=1&u=%2Fnetahtml%2FPTO%2Fsearch-bool.html&r=1&f=G&l=50&co1=AND&d=PTXT&s1=7582809.PN.&OS=PN/7582809&RS=PN/7582809

[237] Michael Murphy, Geoengineering Watch, http://www.geoengineeringwatch.org/html/gates.html.

**INDICATOR 12**

In 2009, the European Court of Human Rights ruled against water fluoridation, stating that it must be treated as medicine and cannot be used to prepare commercial foods. Despite this landmark decision on how to classify and regulate 'functional drinks' in the European Community, no action has been taken against Ireland, the UK and Spain, who still use water fluoridation to the tune of 75%, 10% and 10% of their countries respectively.[238]

The ECHRs decision is being ignored, as are the 15% of childless couples in the EU and elsewhere in the West, the additional 15% whose sexual orientation has been changed through fluoride-induced mutations, the thousand children who fall ill with bone cancer every year and who either die or have their limbs amputated, the six million children in the EU and the US alone with attention deficit hyperactivity disorder (ADHD), the million children with autism, the millions of children who have been rendered retarded or close to, and the countless other victims whose health is altered in crippling ways by fluoride. The demographic imperative supersedes all others.

In the United States the legal hurdles are even more impenetrable than in Europe, as the judiciary is fully on board the government's program of mass murder. The eugenicists from the American Dental Association boast:

> *"During the last sixty years, the legality of fluoridation in the United States has been thoroughly tested in our court systems. Fluoridation is viewed by the courts as a proper means of furthering public health and welfare. No court of last resort has ever determined fluoridation to be unlawful. The highest courts of more than a dozen states have confirmed the constitutionality of fluoridation. In 1984, the Illinois Supreme Court upheld the constitutionality of the state's mandatory fluoridation law, culminating 16 years of court action at a variety of judicial levels. Moreover, the U.S. Supreme Court has denied review of fluoridation cases thirteen times, citing that no substantial federal or constitutional questions were involved.*
>
> *It has been the position of the American courts that a significant government interest in the health and welfare of the general public generally overrides individual objections to public health regulation. Consequently, the courts have rejected the contention that fluoridation ordinances are a deprivation of religious or individual freedoms guaranteed under the Constitution. In reviewing the legal aspects of fluoridation, the courts have dealt with this concern by ruling that: (1) fluoride is a nutrient, not a medication, and is present naturally in the environment; (2) no one is forced to drink fluoridated water as alternative sources are available; and (3) in cases where a person believes that fluoridation interferes with religious beliefs, there is a difference between the freedom to believe, which is absolute, and the freedom to practice beliefs, which may be restricted in the public's interest."*[239]

[238] Doug Cross, European Court ruling spells an end to water fluoridation, UK Council Against Water Fluoridation 22 July 2009, http://www.infowars.com/european-court-ruling-spells-an-end-to-water-fluoridation/.
[239] Fluoridation Facts, American Dental Association, 2005. http://www.ada.org/sections/newsAndEvents/pdfs/fluoridation_facts.pdf.

National and international courts have been complicit in crimes against humanity from the very beginning of the depopulation by fluoridation campaign. Earlier decisions made by European national courts in the 1970s and 1980s, which found water fluoridation to be unsafe or unconstitutional, have been bypassed by the political establishment through salt, milk and systemic fluoridation.

The only international court to have defended the interests of the people and our lives, the European Court of Human Rights, has been annihilated by the global eugenic establishment under the pretext of reform.[240]

We are on our own, as we can expect no help from the judiciary.

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[240] "*The People's Declaration on Restoring the Powers of the European Court of Human Rights*", 9 May 2011, available at: https://wikispooks.com/w/images/e/e0/THE_PEOPLE%27S_DECLARATION.pdf and at http://cryptome.org/0003/kevin-galalae6.pdf.

## INDICATOR 13

It is relatively easy to show that the eugenicists knew from the very beginning about fluoride's sterilizing power.

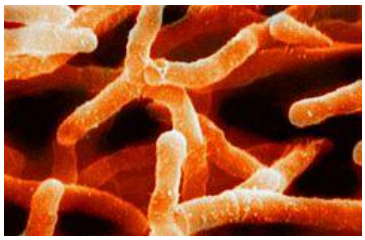
In 1950, only two years after the World Health Organization was established in Geneva, Switzerland, Hansjakob Wespi, a Swiss gynaecologist, wrote an article on salt fluoridation as a means to prevent dental caries[241]. I asked myself why would a gynaecologist, whose specialty is confined strictly to the health of the female reproductive system, come up with such a notion and why would he so brazenly intrude on dental medicine?

Wespi is a very hard man to research as his name appears only as a reference in much later publications that cite the two articles and one book he wrote on the usefulness of fluoride salt in combating cavities. There are no monograms or Wikipedia articles dedicated to him, which in itself is conspicuous considering that half the world is using his method of caries prevention.

Wespi's insights into fluoride and cavities prevention, however strange they may seem at first glance, are firmly rooted in his area of specialization. In 1934, Wespi completed his 43-page doctoral dissertation *"about stomach actinomycosis",* which is the literal translation of the original German title of his doctoral work.[242]

Actinomycosis is an infectious bacterial disease caused by Actinomyces, a type of anaerobic bacteria (i.e. lives without oxygen) that rarely afflicts humans, but when it does it forms painful abscesses in the mouth, lungs or the gastrointestinal tract. They enter the human body through the mouth where they live in the small spaces between the teeth and gums, causing infection only when they can multiply freely due to poor oral hygiene, periodontal disease or dental work that causes tissue damage to the oral mucosa, which is why it is the most common infection in dental procedures and oral abscesses. Another common site of infection is the intestines and the pelvic area, the latter of which turns into **pelvic inflammatory disease** (PID), characterized in women as an inflammation of the uterus and/or ovaries, which, if untreated, leads to infertility.

The potency of actinomyces was well known for their role in soil ecology, where they produce enzymes that help degrade organic material and lead to the formation of compost.



What Wespi also knew is that actinomycosis in any part of the human body, including the uterus and ovaries, is most frequently caused by *Actinomyces israelii*, a type of the actinomyces bacteria known since 1978 when it was discovered in humans by James

[241] Wespi H. J., Fluoridiertes Kochsalz zur Cariesprophylaxe. Schweizerische Medizinische Wochenschrift, 80: pp. 561–564 (1950).

[242] Wespi, Hansjakob: *Über Bauchaktinaomykos*. Inaugural-Dissertation. Zürich: A.-G. Gebr. Leemann, 1934.

Israel and that is easily misdiagnosed. More than this, Actinomyces israelii is a normal colonizer of the vagina, colon and mouth and causes infection only when the mucosal barrier is breached either during a medical procedure or during sexual intercourse.

Having established a connection between bacteria in the mouth and in the reproductive organs, he proposed an easy preventative method through the habitual use of fluoride and suggested common salt as the delivery vehicle, knowing that fluoridated salt when ingested will kill the actinomyces in the mouth, the pelvis and anywhere else they might have found residence, while at the same time also kill the far more sensitive male sperm, which is less resistant to chemical attack than a rugged bacteria. But while freely announcing and advocating the usefulness of fluoridated salt in keeping the mouth and teeth free of bacteria, he conveniently "forgot" to mention the destruction it will cause to sperm and thus gave eugenicists the medical pretext they needed to accomplish their depopulation goals discreetly. Ever since, men have been shooting blanks and total fertility rates have been plummeting.

This deadly knowledge did not prevent the eugenicists from seeking new ways to attack the human reproductive system. In 1952, just two years after Wespi's paper on fluoridated salt, another Swiss doctor by the name of E. Ziegler, a paediatrician, proposed milk fluoridation as a possible dental caries prevention medium; milk of course being the perfect vehicle to target children.

Both Wespi and Ziegler disappeared into the unknown having done their part in the fluoridation saga, namely give birth and scientific credibility to two new means of mass fluoridation besides water. Dr. Hansjakob Wespi resurfaced from obscurity in 1994 when the International Association for Dental Research (IADR) gave him an honorary membership to the organization.[243]

To keep their scientific contributions low key and prevent their academic scrutiny, neither Dr. Wespi's nor Dr. Ziegler's papers are available on the Internet, or even their abstracts. The book on salt fluoridation Dr. Wespi published in 1956 never saw a second edition or a reprint and it is nearly impossible to read it as it is not available.[244] More than this, when it was published in 1956 it was not printed by a publisher of medical books but by the world's oldest publishing house, based in Basel, Switzerland, the Benno Schwabe Verlag, which has been an independent family-owned publishing house since its inception in 1488.

[243] 72nd General Session and Exhibition of the International Association for Dental Research (IADR), *Journal of Dental Research*; July1994, Vol. 73 Issue 7, p.1244, http://connection.ebscohost.com/c/proceedings/36529609/opening-ceremonies-72nd-general-session-exhibition-international-association-dental-research-iadr-23rd-annual-meeting-exhibition-american-association-dental-research-division-iadr-18th.

[244] Hansjakob Wespi, "Fluor-Vollsalz zur Kropf- und Cariesbekämpfung", Benno Schwabe & Co. Verlag, Basel / Stuttgart, 1956.

Despite the global impact of Wespi's discovery and the importance his book should have in the annals of science, a search on the website of the Benno Schwabe publishing house leads nowhere as neither Wespi's name nor the title of his book are recognized by the original and only publisher of this important book. In fact, Wespi's book appears nowhere, regardless what search engine one uses, and not a single page from it can be accessed and viewed on the Internet.

## INDICATOR 14

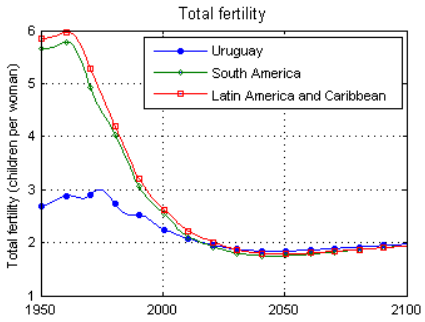
An un-confessed reality is that Uruguay has consistently and relentlessly employed population control since the end of World War II, which is why its TFR has remained absolutely constant for the past sixty years.

| | Total population | Indigenous population | % Indigenous |
|---|---|---|---|
| Bolivia† | 7 960 000 | 5 652 000 | 71% |
| Guatemala | 10 801 000 | 7 129 000 | 66% |
| Peru | 24 797 000 | 11 655 000 | 47% |
| Ecuador‡ | 12 175 000 | 5 235 000 | 42·99% |
| Belize§ | 230 000 | 44 000 | 19·13% |
| Honduras | 6 147 000 | 922 000 | 14·99% |
| Mexico | 95 831 000 | 13 416 000 | 13·99% |
| Chile | 14 824 000 | 1 186 000 | 8% |
| El Salvador | 6 032 000 | 422 000 | 6·99% |
| Suriname ¶ | 414 000 | 25 000 | 6·03% |
| Guyana ‖ | 850 000 | 51 000 | 6% |
| Panama | 2 200 000 | 132 000 | 6% |
| Nicaragua | 4 807 000 | 240 000 | 4·99% |
| French Guyana ** | 100 000 | 4000 | 4% |
| Paraguay | 5 222 000 | 157 000 | 3% |
| Trinidad Tobago | 1 283 000 | 26 000 | 2·02% |
| Colombia | 40 803 000 | 816 000 | 2% |
| Venezuela †† | 23 242 000 | 465 000 | 2% |
| Jamaica | 2 538 000 | 51 000 | 2% |
| Puerto Rico | 3 600 000 | 72 000 | 2% |
| Dominica | 2700 000 | 54 000 | 2% |
| Barbados | 268 000 | 3000 | 1·11% |
| Guadalupe | 280 000 | 3000 | 1·07% |
| Martinique | 73 000 | 1000 | 1·01% |
| Bahamas | 296 000 | 3000 | 1% |
| Argentina ‡‡ | 36 123 000 | 361 000 | 0·99% |
| Costa Rica | 3 841 000 | 38 000 | 0·98% |
| Brazil §§ | 165 851 000 | 332 000 | 0·20% |
| Uruguay | 3289 000 | 1000 | 0·03% |
| Total | 476 577 000 | 48 496 000 | 10·17% |

Data are drawn from several sources,[3,9,10] and compared with local estimates when possible. *Latin America and the Caribbean have 43 countries (South America 13; Central America and Mexico 8; and the Caribbean 22). Data available for 29 countries where Indigenous populations are substantial (end 1990s–beginning 2000s). Other estimates of populations based on different methodologies, definitions of indigeneity, and censuses are the following: †5 800 000 indigenous people in 1994.[11,12] ‡910 146 indigenous people in a total population of 10 600 000 in 1990 (24·85%)[13] while another source estimates the indigenous population at between 40% and 45% of the total population.[14] §38 562 in 2002–03.[15] ¶22 000–25 000 people in 2005.[16] ‖60 000–70 000 people in 2002–03.[15] **15 000 people in 2002–03.[15] ††534 816 individuals representing 2·14% of total population.[17] ‡‡318 683 Indigenous people in 2004, slightly fewer than indicated here.[18] §§370 000 people in 2006 representing 0·20% of total population.[19]

*Table 1:* Indigenous populations in Latin America and the Caribbean by country*

No other country in Latin America has succeeded in keeping its TFR between 3 and 2 throughout the second half of the 20th century. One must not forget that contraceptive methods and family planning were virtually non-existent in the fifties and sixties.




Uruguay kept its TFR below 3 solely by using fluoride. Its success was facilitated by the country's high rate of urbanization. Its TFR profile compared to those of its neighbors and of South America as a whole is so different it might as well be from another planet.

The best explanation for Uruguay's exceptional population control – both in total fertility rates and population growth – must lie with the high number of Nazi officials who found shelter in the country at the end of World War II. Having opened its doors to Nazis fleeing Allied justice and sheltering them from prosecution, Uruguay became a giant laboratory for population control.

As for its indigenous population, there are none left. Yes, the most were killed in the 19th century but the remaining indigenous people were exterminated in the 20th century with such effectiveness that Uruguay is the only country in the Americas to have almost completely eradicated its native population. To date, only 0.03% of its population is native, which in numerical terms means that there are only 1000 Guarani Indians left in all of Uruguay which has a population of 3.3 million. Uruguay is as a result the only country in the continent that is Spanish-monolingual.[245]

Interestingly and not surprisingly, I might add, the countries that sheltered the most Nazis after the war – Argentina (0.99% natives), Brazil (0.2% natives), Chile (8% natives) and Uruguay (0.03% natives) – are also the countries with the lowest percentages of indigenous people and the highest percentage of fluoridation. At the other end of the spectrum, the countries with the highest percentages of indigenous people – Bolivia (71%), Guatemala (66%), Peru (47%), Ecuador (43%), Belize (19%) and Honduras (15%) – are also the countries with either no fluoridation programs (such as Bolivia) or with very recent salt fluoridation programs.

This confirms the racist and eugenic nature of depopulation programmes in Latin America just as we have seen to be the case elsewhere in the world with past and ongoing fluoridation programs.

At this point in time, it is worth mentioning that that the earliest fluoridation experiments as well as the first nation-wide fluoridation programmes were conducted on the people of former Axis states, thus on those who lost World War II. That is why Japan was the first to suffer water fluoridation as an American imposition. That is also why the first salt fluoridation experiments and programs were conducted on Hungarian and Finnish children, Hungary being a member of the Axis and Finland a co-belligerent. Undoubtedly, that is also why Thailand and Bulgaria are being used as guinea pigs in the more recent milk fluoridation experiments and national programs; Thailand having been an Axis co-belligerent and Bulgaria a member of the Axis.

A subject that merits scrutiny is why the United States, Europe and Russia are censoring the books of Professor Hugo Fernandez Artucio, *"Nazis in Uruguay"*[246] and *"The Nazi Underground in South America"*, which exposed the fascist infiltration of South America's social and political institutions and the presence of Nazis in the highest offices of various South American states back in 1940 when his books were published. Even Wikipedia's article on Professor Artucio fails to mention any of his books, which betrays a level of censorship that is inexplicable given that these books were published in 1940 and 1941 respectively.

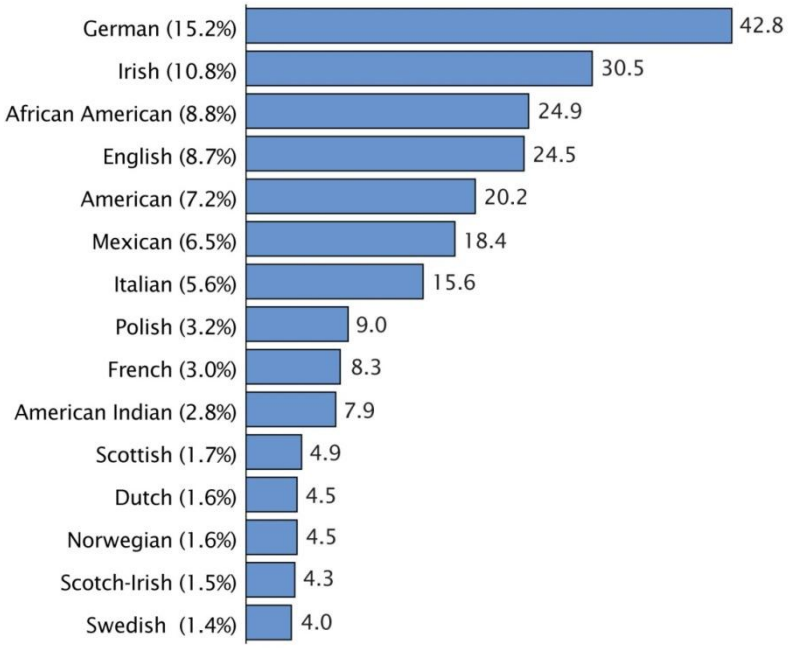
The only logical explanation for this is that the U.S. collaborated with the Nazis who sought refuge in South America to experiment on human subjects in ways that could not be performed at home due to their heinous nature. They did this because they have always shared a common interest with the Nazis, eugenics. This common interest is a common disease that runs thick in

[245] Raul A. Montenegro, Carolin Stephens, Indigenous health in Latin America and the Caribbean, *Lancet*, 2006; 367: 1859-69, http://www.who.int/social_determinants/resources/articles/lancet_montenegro.pdf.
[246] Hugo Fernandez Artucio, *Nazis en el Uruguay*, Ferrar, 1940.

the blood of the nations of Northern Europe and that the U.S. has inherited from its early and most prevalent immigrants: Brits, Germans and Scandinavians. A look at America's ethnic inheritance revels this at a glance.

Figure 2.
**Fifteen Largest Ancestries: 2000**

(In millions. Percent of total population in parentheses.
Data based on sample. For information on confidentiality protection, sampling error, nonsampling error, and definitions, see *www.census.gov/prod/cen2000/doc/sf3.pdf*)




Source: U.S. Census Bureau, Census 2000 special tabulation.

What America's ethnic endowment reveals is that 43 million Americans have German ancestry and 65 million have Irish, English or Scottish ancestry. Add to this mix another 15 million Americans of Dutch, Norwegian or Swedish ancestry and what you get is that nearly half of America's ancestry is of Northern European descent.

The United States, however, does not have a monopoly on racism. The Spanish people of Latin America have conducted their demographic goals with even more disdain towards racial equality than their North American counterparts. In fact, as we have seen and as you are about to read further down in this book, the depopulation agenda throughout the world has been and is being conducted with racist motivations first and demographic considerations second.

## INDICATOR 15

Politicians are not known to pursue policies that harm their popularity especially when they require hefty long-term investments that bring criticism and suspicion, which cost votes. Yet regardless of stripe or country, administration after administration has pursued water or salt fluoridation as though their lives depended on it. Why should this rather insignificant health measure require such special consideration, staying power and political commitment and sacrifice if its purpose is just to prevent a few caries? Also why would it take precedence over running water, sanitation, housing and in the early days, even over rebuilding infrastructure destroyed during the war? Obviously there is more to it than meets the eye and more than we are led to believe.

I know of no other instance when governments clamor to spend large amounts of money over decades without being asked to make such sacrifice by their electorate and in fact, more often than not, against their people's expressed will, while going out of their way to ignore far more urgent needs that beg to be addressed and that are of far greater importance than dental caries. Just as strange, more often than not developing countries pay for their ambitious water fluoridation programs with borrowed money that would be much better invested to extend sanitation and the availability of clean drinking water, which are truly vital to human health and the wellbeing of the nation.

Yet the same paradox is echoed by every national, international and multilateral organization. The World Health Organization (WHO), for instance, laments in its 2008 publication for the International Year of Sanitation that:

> "*2.6 billion people do not have a clean and safe place to use for performing their bodily functions – they lack that basic necessity, a toilet. Among those who make up this shocking total, those who live in towns and crowded rural environments daily confront squalor all around them, including human faeces, flies, and other disease-carrying agents."*

It then asks,

> *"How on earth have we managed to get into a sanitation crisis of such epic scale? How has it happened that the item regarded by health professionals as the most important medical advance in the last 140 years, according to a recent survey, is absent from so many people's lives?"*[247]

I should think the answer lies in its wrong priorities and misplaced investments into frills like water fluoridation. This misplaced priority would be deemed illogical, criminally negligent and fiscally irresponsible were it not for the hidden purpose of water fluoridation as a tool of population control. Of course, urging countries that cannot afford piped water let alone toilets

[247] *Tackling a Global Crisis: International Year of Sanitation*, WHO 2008, see p. 6 and 9, http://esa.un.org/iys/docs/IYS_flagship_web_small.pdf.

for many of their people to invest in water fluoridation does not sound crazy or irresponsible when one knows that there is no better or cheaper way to reduce fertility and therefore prevent the misery of overpopulation than fluoridated water. Once privy to that knowledge water fluoridation makes perfect sense and looks like a wise investment indeed, so long as one is willing to ignore the tragic side-effects and the collateral damage – the lost lives, loins, wombs, minds and limbs of this method of mass medication.

Recently, the WHO has warned that although sanitation coverage increased from 49% in 1990 to 63% in 2010 the world still falls short of the Millennium Development Goals. More importantly, *"there are still 780 million people without access to an improved drinking water source".*[248]

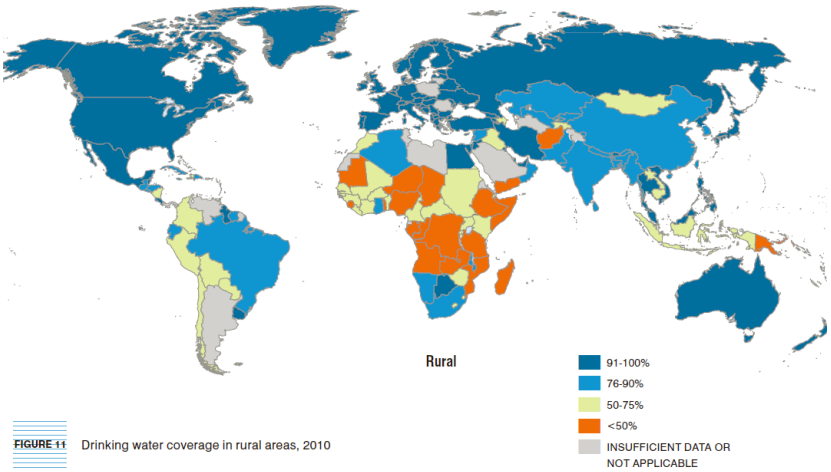


FIGURE 11 Drinking water coverage in rural areas, 2010

Nevertheless, it continues to promote and fund water fluoridation instead of channeling those human and material resources towards making sure that every human being on earth has access to clean drinking water and a toilet.

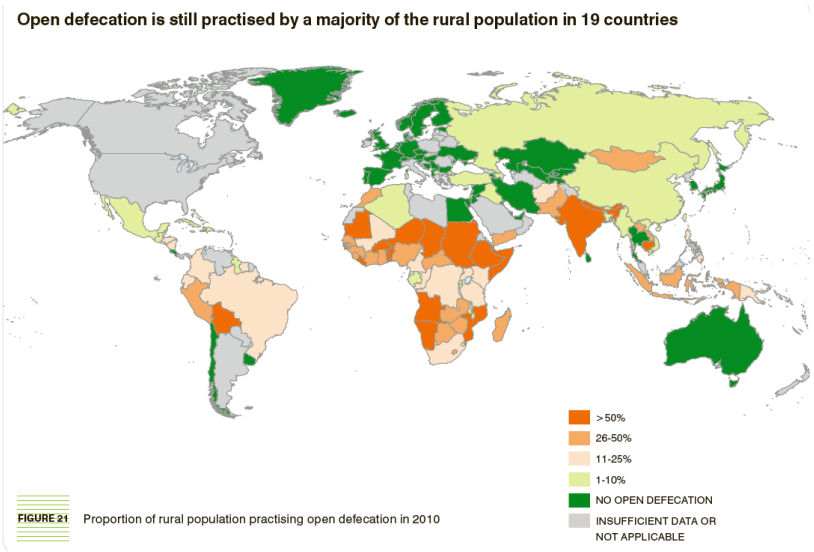


FIGURE 21 Proportion of rural population practising open defecation in 2010

Of course, lowering fertility and stabilizing population growth does have a direct and positive impact on standard of life for the entire nation and further still for the entire world. The people at the WHO are neither ignorant nor negligent, but they are lying and pursuing the overarching goal of population stabilization in the wrong way and through criminal means.

People do not deserve mass poisoning, they deserve mass

[248] Progress on Drinking Water and Sanitation: 2012 Update, UNICEF/WHO 2012, http://whqlibdoc.who.int/publications/2012/9789280646320_eng_full_text.pdf.

education. Our defenseless children do not deserve to be chemically degraded and downgraded; they deserve to be treated like national treasures. Instead our children are being treated like genetic garbage to be discarded at will.

Unfortunately, the people with the money, the power and the knowhow have made a decision; come hell or high water they will prevent the birth of 4 billion people by force and stealth and not by open persuasion and render 75% of the global population infertile. Anyone who stands in the way of their goal, be they children or adults, will be mercilessly mowed down. They will take no prisoners and they will shed no tears. In their view, the cannon fodder of the past century has become the genetic garbage of today. They forget that the brightest minds come from the humblest backgrounds, that honesty goes a lot further than deceit, that love not hate makes the world turn round, and that to lead means to point the way to a better future not forge a hellish present.

Yet, as I criticize them for being inhumane, dishonest and indecent, I cannot help but recognize that people are ignorant, selfish and careless and that few are those who would put the world's giant problems ahead of their petty goals. The reality is that the world's population is out of control and at this late hour only the most drastic interventions will have the significant impact needed to halt mankind's runaway train from colliding with the earth's last remaining healthy ecosystems. But the methods they have chosen to address overpopulation are not only wrong they are immoral, criminal and diabolical.

The World Bank, like the WHO, UNFPA, UNICEF and other UN agencies, does its bit and recognizes that it is best placed to force everyone to act. By 1984, when it published its World Development Report, the World Bank had already been involved with population control for two decades and wished to share its experience with developing countries willing to pursue "rapid" fertility and mortality declines, to which end they *"can take conscious steps to influence their demographic futures"* especially if they intend to bring down their fertility rates *"more quickly than projected."* (p. 21)

*"In the area of fertility reduction",* the World Bank warns, *"inaction is itself a choice which has implications for both future policy and the room for maneuver that a government will later have".* In other words do nothing at your own peril for you will pay a heavy price later on. *"What distinguishes countries with a population policy from those without one is an explicit demographic objective and the institutional mechanism to translate that objective into effective policy."*[249] What the bank means is that achieving control over population growth requires serious commitment and specific goals. Countries that show such commitment will be rewarded

[249] *World Development Report 1984*, World Bank, Oxford University Press, http://econ.worldbank.org/external/default/main?pagePK=64165259&theSitePK=469382&piPK=64165421&menuPK=64166322&entityID=000178830_98101903341963

by the Bank not only by more foreign aid but also by the greater impact that money will have on the overall economy. (p. 169)
Countries that *"have made significant progress in developing a policy to reduce population growth"* are praised while those who have not set targets are excoriated. Interestingly, the World Bank notes that progress can also be reversed as *"in five countries – Chile, Costa Rica, Fiji, Jamaica and Panama* – [where] *family indices have declined by as much as half in the past decade* (i.e. from 1974 to 1984)." By that the Bank means that the number of children born per woman had climbed back up and that half the progress made by conventional population control measures was lost.

The Bank pushed these nations to adopt new population control measures, for soon thereafter Costa Rica, Jamaica and Chile adopted either water or salt fluoridation. The reader will remember that in 1987, Costa Rica and Jamaica became testing grounds for nation-wide salt fluoridation programs funded by the UN. What I have not yet discussed is that in 1986, Chile introduced water fluoridation and chose the city of San Felipe as its testing ground, whose children were subjected to a study in 1996, thus ten years later, that found 95% of the babies born after water fluoridation was started in the city and who had been fed with powdered milk mixed with tap water were afflicted with fluorosis.[250] Chile has nevertheless expanded its water fluoridation scheme and also uses fluoridated milk to 6% of its population.

Panama held out until 2011 when the Pan American Health Organization (PAHO) launched a universal salt fluoridation program there and in several other South American countries. It had however previously introduced water fluoridation and to date some 25% of its population drinks poisoned water. As for Fiji, it caved in to international pressure and introduced water fluoridation in the 70s only to discontinue it in the 80s everywhere except in the capital, Suva. It is hard to keep a secret of this magnitude on small islands where everyone knows everyone else and most everyone is related.

As of 2010, the Fijian government has found the courage to force water fluoridation on its people. The Ministry of Health revealed it is working with the Water Authority of Fiji to fluoridate water supplies across the country.[251] In January 2012, it has also introduced legislation that bans the sale of non-fluoridated toothpaste and anyone caught selling fluoride-free toothpaste is prosecuted. All non-fluoridated tooth paste is removed from the store shelves

[250] Villa A.E., Guerrero S., Icaza G., Villalobos J., Anabalo´n M., Dental fluorosis in Chilean children: evaluation of risk factors, *Community Dentistry and Oral Epidemiology*, 1998; 26: 310–15., C. Munksgaard, 1998, http://radiologia.cl/revminsal/estudios/incluidos/Villa%20(1998)%20Dental%20fluorosis%20in%20chilean%20children%20evaluation%20of%20risk%20factors.%20Community%20Dent%20Oral%20Epidemiol.%2026%3B%205%20pp.%20310-315..pdf
[251] Jessica Tasman-Jones, Fluoridation row in Fiji splits health officials and activists over oral health, *Pacific Scoop*, 12 September 2010, http://pacific.scoop.co.nz/2010/09/fluoridation-row-in-fiji-splits-health-officials-and-activists-over-oral-health/

by health inspectors and disposed of as an illegal product.[252] In other worlds, Fijians no longer have a say in how many children they can have. The State is now in charge of that decision.

Further down the text Columbia is discussed in glowing terms and given as a shining example for all to follow. We are informed that:

> *"In 1966 Colombia's Ministry of Health signed an agreement with a private medical association to provide a program of training and research that included family planning. By combining low-key public support with private family planning programs, the Colombian government has helped facilitate a rapid fertility decline."*

The reader will remember that in 1969 the Colombian government drafted its water fluoridation strategy and went full speed ahead implementing it. The reader will also remember that Columbia was instrumental in starting salt fluoridation in the Americas and that the city of Medellin has served as the primary meeting place for eugenicists in Latin America. The World Bank has been heavily involved in Columbia's fluoridation program just as it has been involved throughout the world from the very beginning.

By its own admission:

> *"During the 1960s and 1970s, bilateral donors and multilateral development agencies, including the World Bank, started to invest in family planning programs as a way to control population growth, which was seen as an obstacle to economic development in poor countries. Following the publication of The Population Bomb (Ehrlich 1968), in which the rapidly growing global population was described as a "population explosion", international support for family planning to control population grew strongly in popularity, and donor support for family planning expanded rapidly."*[253]

But the World Bank is but one among many national and international agencies and organizations that have worked hand in glove to ensure that the depopulation agenda advances to every corner of the world. While its role is crucial, it needs broad cooperation:

> *The Bank has a potential comparative advantage to address these issues* [i.e. achieving sustainable reductions in fertility] *at the highest levels of country policy setting, not only with ministry of health counterparts, but also with officials from finance and planning. This is important given the increasing recognition that political economy is a critical factor in the implementation of*

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[252] Avinesh Gopal, Health to crack down on non-fluoridated toothpaste, *Fiji Times*, 11 January 2012, http://www.fijitimes.com/story.aspx?id=190451.

[253] *Population Issues in the 21st Century. The Role of the World Bank*. HNP (Health, Nutrition, Population) Discussion Paper, April 2007. The International Bank for Reconstruction and Development/The World Bank, p. 29, http://siteresources.worldbank.org/HEALTHNUTRITIONANDPOPULATION/Resources/281627-1095698140167/PopulationDiscussionPaperApril07Final.pdf.

*population and reproductive health programs, particularly in high-fertility countries. Its involvement in many sectors in countries can produce synergies that will allow faster progress than a more narrow focus on family planning services* [i.e. family planning without fluoridation is useless]. *The Bank will need its partners – United Nations Population Fund (UNFPA), World Health Organization (WHO), key bilaterals – to provide technical expertise and administrative knowledge in areas such as procurement of contraceptives, service delivery, and demand creation. The Bank will need to work with non-governmental organizations (NGOs) and community-based organizations to ensure that poor and other hard-to-reach women* [i.e. women outside water, milk and salt fluoridation programmes] *have access to reproductive health services, as well as help to work with communities to improve the demand for such services. It will also need to refocus internally, and build a consensus view in which unsustainably high fertility is once again included in discussions with governments.*[254]

The World Bank has operated discreetly at the governmental and intergovernmental levels and has used its financial clout and reputation with good effect, but its role in the depopulation agenda has not gone unnoticed.

*"Most people familiar with the mission of the World Bank see it as an organization dedicated to rebuilding infrastructure in war-torn nations and to promoting economic progress in the developing world. As a result, the Bank has enjoyed the status of one of the world's more respected and uncontroversial inter-governmental organizations. And while it is true that the Bank still devotes an enormous amount of its financial resources to traditional areas of economic development, it has also devoted a very large portion of these resources towards population control programs over the last few decades. These programs—which are usually executed through loans to poor nations—ultimately provide money for sterilization operations, and the distribution of contraceptives, all around the world.*

*Many simply do not know that for decades the Bank has funded aggressive population control programs in the developing world, and still less do they know how extensive the Bank's funding and support for these programs has been. While most people probably favor the idea of an international, inter-governmental, infrastructure-rebuilding and economic development bank, millions of people all around the world do not support contraception, sterilization or population control programs in general."*[255]

While the World Bank supplied loans and used the promise of easy money and high level bribes to corrupt or coerce the political establishments of poor countries to embrace depopulation measures, the United Nations Population Fund (UNFPA) has been in charge of on the ground implementation and monitoring of the fluoridation program and other population control measures. The third leg of the depopulation triumvirate is the World Health Organization (WHO), whose role is to supply the medical rationale for fluoridation and to create "scientific evidence" to this effect.

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[254] Ibid., p. 15.

[255] Andrew M. Essig, *The World Bank: How It Compromises Economic Development by Promoting a Population Control Agenda*. The International Organizations Research Group, Catholic Family & Human Rights Institute, White Paper Series Number Seven, 2007, p. 1, http://www.c-fam.org/docLib/20080425_Number_7_World_Bank_2007.pdf.

UNFPA works quietly and from the shadows. Its public image is well nurtured to give the impression that its focus is on families and women's and children's health. In reality, the sole reason for its existence is to reduce the fertility level worldwide to one-child per woman and to do it through mass poisoning. All other family planning/depopulation measures – such as providing medical services to pregnant women, free access to birth control, surgical sterilization on demand, and abortion – are mere fronts for fluoridation, as they have far less impact than fluoridation.

*

I could spend the next ten years writing about the innumerable connections between the actions of the World Bank (and the many other organizations involved in depopulation) and the repercussions of those actions on the ground in countries around the globe and bore the reader to death in the process, which is why I will now concentrate on giving the briefest summary of the historic development of population control and fluoridation. This section of the book, I forewarn the reader, is a real eye opener and will fundamentally alter everyone's perception of the world.

The following is the timeline of watershed moments in the global depopulation/fluoridation project, the world's most titanic and diabolical undertaking.

## No. I - YALTA/POTSDAM - 1945

It was first at Yalta (February 4–11, 1945) and subsequently reaffirmed at Potsdam (July 17 – August 2, 1945) that the United Kingdom, the United States and the Soviet Union (represented by British Prime Minister Winston Churchill, U.S. President Franklin Roosevelt [replaced by Truman at Potsdam], and Soviet Premier Joseph Stalin), agreed in secret to ensure future peace in Europe by controlling population growth; this being the only way to prevent future wars due to resource scarcity or territorial encroachments caused by lack of Lebensraum. This early and verbal agreement has been the anchor of the depopulation through fluoridation agenda. Furthermore, the agreement conforms to the principles of the Atlantic Charter (issued August 1941) that defined the Allied goals for the post-war world, of which the most important was to refrain from territorial aggrandizement and abandon the use of force.

Several events indicate this:

Winston Churchill, Harry S. Truman, and Joseph Stalin

1. Water fluoridation in Japan began as soon as the Japanese surrendered (2 September 1945). The Japanese having incurred the Allies' wrath and being the most likely to be the first to exceed the limited natural resources of their island, were chosen to serve as the world's testing ground for mass water fluoridation. By 1960, Japan reached replacement level TFR.
2. Fluoridation in the US began in January 1945 in Grand Rapids, Michigan, on an experimental basis, but it was not until 1951 that it became official policy of the U.S. Public Health Service and not until 1960 that fluoridated water reached 50 million Americans, 1/3 of the population at the time.
3. Fluoridation in the Soviet Union was already used in POW camps as early as 1940 and it was undoubtedly first let loose en masse on the Baltic republics (Latvia, Estonia and Lithuania) as soon as the war ended, judging by their rapid decline in fertility. By 1960 water fluoridation was universal throughout the Soviet Union.
4. In the U.K., water fluoridation started in 1955 and was in wide use by 1960.

It can be no coincidence that the very first nations to use water fluoridation were the same nations that agreed on the partition of Europe and on the terms of peace at the end of World War II. It can also be no coincidence that the same nations reached wide-spread water fluoridation at the same time, 1960, the year when the water fluoridation program they had imposed on the Japanese had reached its goal, replacement level TFR. Having mass tested the water fluoridation scheme on the Japanese people and found it to work better than expected, the big three went ahead and implemented it universally on their own people. It was clearly a coordinated action.

The timing, extent and logistics of water fluoridation in the US, UK and the Soviet Union were coordinated by the big three at the UN Security Council level. And this brings us to the second giant step towards population control, the United Nations.

## No. II - UNITED NATIONS - 1945

The United Nations came into existence on 24 October 1945, and it was there that the policy of water fluoridation was expanded outside the big three. It was also there that the slow and arduous process of winning country after country to the fluoridation philosophy began. Several facts indicate this:

1. The fluoridation campaigns of Western and Eastern Europe were coordinated in a tit for tat manner from the UN starting in 1953, once the organization settled in its new headquarters in New York. The UN was the only place where continuing dialogue on this all-important matter would have been possible, given the Cold War tensions between the US and the Soviet Union. That is why all of Western and Eastern Europe began fluoridation around 1960, by which time the big three – the US, the Soviet Union and the UK – could lead by example, as they had already implemented full-scale water fluoridation schemes.
2. The first nations outside Europe, the UK, the US and the Soviet Union to adopt water fluoridation are all founding nations of the UN. They are: Australia, Canada, New Zealand, Brazil, Chile, and Colombia. To this day, these select nations are among the most adamant fluoridating nations in the world. They were drawn into the confidence of the depopulation lobby early on due to their membership status at the UN as founding nations. Australia, Canada and New Zealand were also part of the British Commonwealth and therefore within Britain's sphere of influence. When Britain said jump, they jumped, just as Hong Kong and Singapore did.
3. China is the last member of the Security Council to use water fluoridation and also its most reluctant. Nevertheless, by doing so it sealed its status as an equal and trustworthy member of the Security Council. Its fluoridation program was a token of its commitment to population control. Officially, it began in 1965 in the Guangzhou Province of southern China. It *"was interrupted during 1976–1978 due to the shortage of sodium silico-fluoride"* and later resumed in only one district *"due to objections"* and then finally halted in 1983. In the end, China chose a different path to deal with overpopulation, the 1978 One-Child Policy that remains in place to this day.
4. The UN provided the neutral ground from which to put in place the necessary tools to advance population control globally, by consensus between like-minded nations if possible and by coercion for reluctant nations when necessary. This was to be the world's greatest endeavor and much was needed to put in place the mechanism necessary to make it a world-wide reality.

From its inception the UN has had one and one purpose only; carry out the depopulation agenda to prevent wars of necessity.

## No. III – World Health Organization (WHO) - 1948

The depopulation lobby understood early on that fluoridation could not be pushed on the well-educated people of Europe unless they could somehow justify its usefulness. The United States had already begun doing so in the early 1940s by using corporate money to sponsor research into fluoride. The case was made that fluoride combats tooth decay, but no sooner was it made that opposition to it from American doctors and scientists took hold. To create a credible databank of research on the medical usefulness of fluoride, give the policy of fluoridation the appearance of being an international phenomenon, and to bypass resistance from the American scientific community, the World Health Organization (WHO) was established 7 April 1948 in Geneva, Switzerland, with the official mandate of disease prevention and control. Its first legislative act, however, was to compile statistics on life and death. The WHO's hidden agenda comes forth in several ways:

1. No sooner the WHO was established in Geneva, that Swiss doctors began churning out research supporting the notion that fluoride is useful in combating tooth decay. In 1950, Hansjakob Wespi, a Swiss gynaecologist, came up with the notion that salt mixed with fluoride would be a great way to combat dental caries and published a paper to this effect. Two years later, E. Ziegler, a Swiss paediatrician, proposed milk fluoridation as a possible dental caries prevention medium. Both disappeared into the unknown having done their part in the fluoridation saga, namely give birth to two new means of mass fluoridation besides water.
2. Since then, the WHO has been the normative organization on fluoride use in water, milk and salt, setting "optimal concentrations" and working hand in hand with national dental and medical associations to dispute the validity of research on the ill-effects of fluoridation and promote and legitimize research highlighting the positive aspects of fluoride, which for the most part are figments of the imagination.
3. The WHO has been churning out reports and assessments on fluoride with increasing frequency ever since and has worked in tandem with the World Dental Federation, the American Association for Dental Research (and its later offshoot the International Association for Dental Research) as well as every national dental and medical organization it could co-opt into its depopulation agenda.

## No. IV – ROCKEFELLER BROTHERS FUND (RBF) - 1951

The Rockefeller Brothers Fund, which had been operational on a small scale since 1940, received a gift from John D. Rockefeller Jr. in 1951 and began to fund population control projects, research and organizations discreetly to help the US government advance its population control agenda by bypassing democratic institutions that could not be taken into confidence on the highly secret matter of depopulation through fluoridation.

The Rockefeller Brothers Fund is an offshoot of a much older family institution, the Rockefeller Foundation, established in 1913, which had been involved in eugenics since the 1920s and had funded German eugenics programs, including Joseph Mengele's, the Nazi doctor before he ran the Auschwitz experiments on human subjects for Hitler.

The force behind the two funds is David Rockefeller. He is the unofficial face of the depopulation agenda and its most prominent private sector proponent.

Without the Rockefeller Foundation and the Rockefeller Brothers Fund the population control agenda agreed upon at the end of World War II by the Allies and first envisioned by British eugenicists at the beginning of the 20th century could not have been advanced in the West or later made any inroads in the wider world. Indeed the combined murders of Germany's Nazis and Europe's fascists were but dress rehearsals for what was to come and pale by comparison with the termination of millions of genetic lines and the prevention of the birth of at least a billions children that was achieved through the discreet funding of the Rockefeller Foundation and the political cover provided by the U.S. and U.K. governments, the tacit cooperation of the Soviet Union and Western European nations, and the reluctant complicity of select governments throughout the world. Several telltale signs betray the true function of the Rockefeller Foundations:

1. The tentacles of the Rockefeller Foundations stretch into every corner of the world, every field of knowledge, and into every organization and sub-organization involved either directly or indirectly in the depopulation agenda. Their philanthropy in five main subject areas – medical, health and population sciences; agricultural and natural sciences; arts and humanities; social sciences; and international relations – has aided many intellectual, cultural and scientific achievements, enhancing the quality of life of millions. Equally, the hidden side of their philanthropy is co-responsible for the termination of at least 30% of the world's genetic lines and for preventing the birth of at least one billion children over the past half century.

2. The first organization the Rockefeller Brothers Fund established is the **Population Council** in 1952, whose stated purpose is reproductive health. It employs five hundred people, has offices in 18 countries throughout Africa, Asia and Latin America in overpopulation hotspots, is active in 33 countries, and has designed and evaluated public family planning programs in the developing world distributing contraceptives and intrauterine devices (IUDs) that were developed by its own researchers. To date it has distributed over 50 million IUDs to over 70 countries. The Population Council's first president was Frederick Osborn, a known eugenicist, author of Preface to Eugenics (New York, 1940), and leader of the American Eugenics Society.
3. By providing fellowships and scholarships to thousands of scientists and scholars and nurturing their careers to the highest positions of power in governments, science institutes and international organizations, the Rockefellers have created the largest private force of intellectual soldiers and have used them in the war against us, the people, both for our sake and to our detriment.
4. The Rockefeller foundations have faithfully financed the key population control organizations and institutes, private and public, national and international, and have sponsored the conferences, studies and programs of *"a vast range of foreign policy and educational organizations"* that would take a tome to list in their entirety. Among them: the Bilderberg Group, the Council on Foreign Relations, the US State Department, the Trilateral Commission, the Royal Institute of International Affairs, the World Bank, dozens of universities throughout the world, the National Institute of Public Health of Japan, as well as hundreds of advisory groups of governmental or quasi-governmental nature.
5. Throughout its history, the United Nations has been one of the main beneficiaries of the Rockefeller largesse, which has been particularly generous towards UN programs and entities involved in the population control agenda. The World Bank has benefitted too, though not as overtly, as the Rockefellers financed the training of foreign officials through the Economic Development Institute.
6. The American national organizations and the UN bodies charged with pushing the fluoridation agenda on an unwilling populace and on a scientific community enraged by the US government's callousness towards human life, have all been modeled after the early institutions the Rockefeller foundations have set up to promulgate various aspects of depopulation: *"the UN's World Health Organization, set up in 1948, is modeled on the International Health Division; the U.S. Government's National Science Foundation (1950) on its approach in support of research, scholarships and institutional development; and the National Institute of Health (1950) imitated its longstanding medical programs."*

## No. V – ASSASSINATION OF JOHN F. KENNEDY - 1963

As a Catholic, John F. Kennedy (President from 1961-1963) was bound by a different covenant than the Anglo-American-Soviet coalition that is the political driving force behind the population control policy. It is my contention that his refusal to expand the depopulation agenda by forcing it on Latin America, which is why he as a Catholic was allowed to become President in the first place (the first and only one in America's history), led to his assassination on 22 November 1963. Truman (1945-1953) and Eisenhower (1953-1961) before him had pushed the population control policy without mercy, as did Lyndon B. Johnson (1963-1969) who took over the Presidency after Kennedy's assassination. Kennedy had threatened the continuity of the depopulation agenda and therefore the framework for peace agreed upon with the Soviets, which may have precipitated the Cuban missile crisis. It should be noted that when Richard Nixon (1969-1974) took over the presidency from Johnson, the depopulation agenda was in safe hands as Nixon had been Eisenhower's Vice President.

Kennedy's assassination could not have occurred without Johnson's approval and his pledge to continue the depopulation policy upon Kennedy's death. Johnson fits the profile, his lust for power and control being legendary and his ambition uncommon *"in the degree to which it was unencumbered by even the slightest excess weight of ideology, of philosophy, of principles, of beliefs."* Johnson was forced on Kennedy as his Vice President to be a contingency option if Kennedy could not overcome his moral limitations. Every American President since Kennedy has been a steadfast supporter of the depopulation agenda, as they were bound to by historic agreement, just as every Soviet/Russian leader has also respected the continuity of the policy as the basis of peace and of the world order forged after World War II.

It has always been posited that Kennedy's assassination could only have been a government job, which explains the secrecy surrounding the Warren investigation, the many inconsistencies in the official explanation of his death and that all documents have been classified and never released to the public. There is little doubt in my mind that Kennedy died for his refusal to kill innocents before they are born by poisoning parents and children alike with fluoride. There is also little doubt that the Soviet Union was intimately involved, which is why Lee Harvey Oswald "defected" to the Soviet Union in 1959 and "returned" to the US in 1962 after he had been trained and briefed by the KGB, which in turn cooperated with the CIA. Jack Ruby (born Jacob Leon Rubenstein) was hired to kill Oswald before an investigation could unravel the true

reason for Kennedy's assassination and the real culprits. The Mafia supplied Jack Ruby for the job, as the Mafia was already part of the fluoridation agenda in Italy. To tie up all loose ends, Ruby was murdered in prison on 3 January 1967 (officially he died of lung cancer), just before a date for a new trial was being set.

The fact that fluoridation is a crime that has no name and no definition – as it is not murder per se (though it murders millions through collateral side effects) but the termination of genetic lines by shutting down the human reproductive system – explains why the Catholic Church has not openly condemned the global policy of depopulation by fluoridation but has instead chosen to remain silent. To this day, the Catholic Church, for all its many flaws, is the only global force to oppose the depopulation agenda and as a form of silent protest the Vatican remains the only sovereign nation from a total of 193 to refuse membership in the United Nations. The Pope's hands are tied behind his back and his lips are sealed by the fact that the depopulation through fluoridation policy occurs by mutual consent and, in the eyes of those who consent to it, by dire necessity and categorical imperative. The most the Pope can do, and every Pope has consistently done, is remind the world of the sanctity of life. Having said this, the Vatican under John Paul II and Pope Benedict XVI, the current Pontiff, bears responsibility for shutting down Latin America's liberation theology that sought to defend the poor and organized as the *Consejo Episcopal Latinoamericano* (CELAM), which in English translates as the 'Latin American Episcopal Conference'. Had the Vatican supported this progressive branch of the Church, it could have built enough opposition to social injustice in Latin America to derail the fluoridation agenda, which has brutally and mercilessly targeted the poor and ethnic minorities. The Vatican chose instead to side with secular powers and to place the Church's hierarchy above the people's wellbeing, as it has always done, abandoning the poor to the exterminating power of fluoridation. As the Cardinal charged with restoring the Vatican's authority in the third world, Ratzinger issued official condemnations of liberation theology in 1984 and 1986, breaking the organization's back, and has never shared knowledge of the secret fluoridation agenda with the rank and file priests of Latin America.

Robert Kennedy was killed for the same reason as his brother John, as soon as he ran for high office in 1968. The eugenicists could not take chances with another Catholic, cut from the same cloth, and likely to be as humane and uncompromising as his older brother.

President Lech Kaczyński of Poland, also a devout Roman Catholic, and his entourage was killed for the same reason as the Kennedys and again with Russian involvement. His plane crashed in April 2010 in Smolensk, Russia, not because it failed to land properly, as the Russian investigators have asserted, but because it was purposefully guided by the Russian air traffic controllers, on whom the pilot had to depend due to bad weather and lack of visibility, to crash just outside the runway.

To hide the truth, President Putin, a former KGB man, took over the investigation himself and the West did its part by blessing the investigation's results, which were a complete fabrication.

**This is the picture that emerges. The bipolar system of the post-war period – composed of the Soviet Union and the communist camp on the one hand and the United States and the capitalist camp on the other – has preserved the peace not primarily through nuclear deterrence as it is believed, but through their collusion in the depopulation agenda.**

**While nuclear deterrence was merely the passive and overt policy of global peace, depopulation through fluoridation was the active and covert policy. Nuclear deterrence and depopulation are two sides of the same coin and one cannot exist without the other. Nuclear deterrence makes war impossible as it would lead to mutually assured destruction and therefore deprives societies of the traditional way of thinning their numbers, violent conflict.**

**If the excess population cannot be discarded of by periodically sending men into war as cannon fodder, which then leaves a large proportion of the females unmarried and childless, therefore depressing population growth for two or three generations, a substitute has to be found that can take enough lives to compare with war.**

**Fluoridation accomplishes the same as war but without material destruction and with infinitely less overt human suffering. It is therefore, in the minds of our leaders, an elegant solution to an age-old problem, overpopulation, now exacerbated by extraordinary advances in medicine, nutrition and living conditions that have led not only to a population explosion but also to much longer lives.**

**While this is good for the individual it is a conundrum for societies, which now have to contend with feeding and clothing and sheltering a greater number of people than ever before at a greater pace than ever before and who must do so without the safety valve of war, which allows those in power to sacrifice the few to save the many once the population has outgrown the available resources.**

**The importance of fluoridation cannot be overstated, but it cannot exist as a depopulation policy without the other side of the coin, a credible threat from a credible nuclear-armed enemy that makes total mutual annihilation inevitable. Without such a threat, the political leadership can no longer justify the secret war it wages on its own people in order to prevent the greater evil of mutually assured destruction through nuclear weapons.**

**When the Soviet Union dissolved in 1991, it was necessary for world peace that the Soviet and American leadership (of Michael Gorbachev and Ronald Reagan) find a new instrument – since nuclear deterrence had been invalidated by the cessation of the Cold War – that would reaffirm their commitment to the depopulation agenda. The Earth Charter came to be that instrument and the secret depopulation agenda is hidden this time behind a new byword, sustainable development. The lethal threat now used by our governments to justify the war on us is environmental catastrophe and that threat comes from us and is a much greater threat than its antecedent, resource scarcity. As long as we**

**procreate and our numbers grow, our governments will have no choice but to wage war on us and treat us the way the Nazis treated the Jews. What Hitler did to the Jews, our own governments have been doing to us for over half a century, but in a more subtle and "humane" way. They poison us with the same poison used on the Jews, fluoride, and they do it in our own countries, which they have turned into giant concentration camps where neither children nor women are spared; where in fact children are the first target of chemical warfare. Since 1945, we have all been Jews; we have been treated as Jews and killed as Jews.**

**Anticipating the collapse of the Soviet Union, of which the West was warned in advance by the Soviet leadership, the United Nations World Commission on Environment and Development called in 1987 for a new charter to guide the transition to a new world order and to preserve peace through a new ethos called sustainable development, of which population control is the most vital component. In 1992, immediately after the collapse of the Soviet Union, then Secretary General of the UN, Boutros Boutros-Ghali, urged the international community to adopt a new charter at the Rio de Janeiro Earth Summit and the process was jumpstarted in 1994 by Mikhail Gorbachev, Maurice Strong (Chairman of the Earth Summit) and the government of the Netherlands, which is a steadfast supporter of the depopulation agenda and its most generous patron.**

**The lethal threat to humankind that environmental catastrophe represents, has replaced the threat of mutual annihilation by nuclear weapons as the justification for not only continuing but expanding the ambit of the depopulation policy, which is why genetically modified organisms were added to the existing arsenal of fluoridation methods as the newest eugenic weapon of mass destruction.**

## No. VI – WORLD BANK - 1968

The World Bank was created in 1948 but it was not until 1968 that it was retooled to focus its attention and substantial financial means on population control. To this end, Robert S. McNamara, former Secretary of Defense in the Johnson Administration, was appointed President of the Bank in 1968 and he immediately began to transform the organization according to the task he received and full-heartedly believed in.

The World Bank's initial role was to assist the post-war reconstruction and development effort and to aid the developing world for the purpose of enshrining liberal economic principles at the basis of the international economy. In its new and enhanced role, the World Bank under McNamara became a driving force of the depopulation policy by accelerating lending from $1 to $12 billion, making family planning of paramount importance, strengthening ties with other international organizations, and

expanding to countries and sectors the bank had not been previously involved in.

At his inaugural speech McNamara declared:

> *"The rapid growth of population is one of the greatest barriers to the economic growth and well-being of our member states… The control of population growth is yet another area where the Bank needs to take new initiatives."47*

Two years into his tenure he established the Populations Projects Department at the World Bank to deal exclusively with depopulation measures. While he openly advocated contraceptives for the developing world as the best way to curb population growth, secretly he pandered fluoridation to world leaders eager to get their hands on money from the World Bank.

By 1977 McNamara was emboldened enough by the strength of the depopulation effort that in a speech titled "Address on the Population Problem" he was not afraid to talk about coercive approaches to population control as the direction in which countries were already moving:

> *"No government really wants to resort to coercion in this matter. But neither can any government afford to let population pressures grow so dangerously large that social frustrations finally erupt into irrational violence and civil disintegration. That would be coercion of a very different order. In effect, it would be nature's response to our own indifference."72*

Every World Bank president that has come after McNamara has continued the depopulation mission and solidified it by increasing funding for it. In 1987, for instance, the World Bank supported 10 projects of family planning whereas by 1999 the number had increased to 150 projects.

In its World Development Report, published in 1984, the World Bank's comprehensive population policy included: *"ensuring political commitment from national leaders, creating proper institutions for the effective implementation of political commitments, intensifying support for family planning services, and formulating national policies that offer wide-ranging incentives to slowing population growth, and wide-ranging disincentives to increasing population growth."*[256]

The World Bank has pursued this policy openly with rootless determination, while at the same time pushing fluoridation in the strictest confidence and at the highest political level with every loan it made to the developing world.

The World Bank's Department of Health, Nutrition and Population (DHNP) was established to be the latest tool in the Bank's depopulation kit; one that has been put to good use in Asia and Africa. According to its mission statement its purpose is to *"assist clients to improve health,*

[256] Andrew M. Essig, *The World Bank: How It Compromises Economic Development by Promoting a Population Control Agenda*. The International Organizations Research Group, Catholic Family & Human Rights Institute, White Paper Series Number Seven, 2007, http://www.c-fam.org/docLib/20080425_Number_7_World_Bank_2007.pdf.

*nutrition, and population outcomes of poor people and protect people from the impoverishing effects of illness, malnutrition, and high fertility."* It links with sister departments within the WHO, UNFPD and FOA to coordinate the depopulation agenda by pandering fluoride as an essential mineral that is to be added to food and water to aid tooth and bone health.

The World Bank's most important function in advancing the fluoridation agenda was and continues to be to fund legitimate and politically acceptable family planning measures in advance of fluoridation and to support these measures and programs while fluoridation is in place. This is crucial if the effects of fluoridation on fertility and crude birth rates are to be explained as successes of the official family planning policy rather than be uncovered for what they are, namely the results of the covert fluoridation program.

## No. VII - UNITED NATIONS FUND FOR POPULATION ACTIVITIES (UNFPA) - 1969

To take the depopulation agenda globally, the UN formed a new agency in 1969, the United Nations Fund for Population Activities (UNFPA) – later renamed the United Nations Population Fund – and entrusted it with the task of advancing the depopulation agenda on the ground. To this day, UNFPA pursues this agenda under the politically acceptable cover of promoting the right to reproductive health and providing universal access to reproductive health services, a goal it intends to accomplish by 2015.

UNFPA was intended from the very beginning to provide the foot-soldiers of the depopulation campaign and was staffed and funded accordingly. It soon became the world's largest multilateral source of funding for population and reproductive health programs, as well as the most technically astute in reducing fertility through various methods, water fluoridation included. UNFPA works with governments and non-governmental organizations across the world and has the full support of the international community, though not always the support of governments.

From its headquarters in Washington, UNFPA operates in 155 countries and has offices in 119 countries around the world. It has 5 liaison offices in countries that are major donors to the depopulation cause and that serve as organizational hubs (Washington U.S., Brussels Belgium, Copenhagen Denmark, Geneva Switzerland and Tokyo Japan). It has 6 regional offices in countries that offer their unmitigated political support and protection of the depopulation cause (Panama City Panama, Cairo Egypt, Istanbul Turkey, Bangkok Thailand, and Johannesburg South Africa). Last, it has 6 sub-regional offices in countries that are currently involved in major depopulation initiatives with the UN (Kingston Jamaica, Suva Fiji, Kathmandu Nepal, Dakar Senegal, Almaty Kazakhstan, and Johannesburg South Africa).

With a retooled World Bank and the UNFPA and WHO in place, the depopulation lobby could pursue its fluoridation agenda with a three-pronged approach. The World Bank offers financial incentives and applies pressure at the highest political level, the Population Fund has people on the ground with the necessary expertise, and the World Health Organization supplies the scientific arguments and justification needed to convince reluctant politicians, co-opt hungry scientists and hire medical personnel.

## No. VIII – DAVID ROCKEFELLER'S MISSION TO LATIN AMERICA AND JOHN D. ROCKEFELLER'S POPULATION REPORT – 1969 & 1970

By the late 1960s the depopulation agenda had gathered momentum and the time had come to push Latin America to commit to depopulation measures and show concrete results for the money they were receiving in US aid through the Alliance for Progress project that President Kennedy had set up to aid Latin America's development in good faith, but that Johnson and Nixon had subsequently hijacked and made conditional on the adoption of strict population control measures.

Nixon sent David Rockefeller in the spring and summer of 1969 on four separate trips to twenty Latin American countries that officially were to *"initiate a period of hemispheric collaboration",* but that unofficially intended nothing more than concrete commitments to depopulation through either water, salt or milk fluoridation.

Officially, the trips were public relations disasters, as everywhere Rockefeller went he was met with ugly demonstrations. Unbeknown to the public, however, his mission was an extraordinary success, as the entire continent promised to pursue one or several methods of fluoridation. Several countries, of course, were already in advanced stages of fluoridation. In Chile, Uruguay and especially Columbia, Rockefeller was preaching to the choir.

That David Rockefeller's mission to Latin America was all about persuading leaders to commit to the depopulation agenda can be easily inferred by the *"Population and the American Future: The Report of the Commission on Population Growth and the American Future"*, which was commissioned by President Nixon and chaired by John D. Rockefeller, David Rockefeller's brother. It was published in 1970 after two years of deliberations that took place at the same time as David Rockefeller was pushing population control in Latin America. The Report's preface states:

> *"For the first time in the history of our country, the President and the Congress have established a Commission to examine the growth of our population and the impact it will have upon the*

*American future. In proposing this Commission in July 1969, President Nixon said: "One of the most serious challenges to human destiny in the last third of this century will be the growth of the population. Whether man's response to that challenge will be a cause for pride or for despair in the year 2000 will depend very much on what we do today." The Commission was asked to examine the probable extent of population growth and internal migration in the United States between now and the end of this century, to assess the impact that population change will have upon government services, our economy, and our resources and environment, and to make recommendations on how the nation can best cope with that impact."*

The Report's perspective is made clear in the first paragraph:

*"In the brief history of this nation, we have always assumed that progress and "the good life" are connected with population growth. In fact, population growth has frequently been regarded as a measure of our progress. If that were ever the case, it is not now. There is hardly any social problem confronting this nation whose solution would be easier if our population were larger. Even now, the dreams of too many Americans are not being realized; others are being fulfilled at too high a cost. Accordingly, this Commission has concluded that our country can no longer afford the uncritical acceptance of the population growth ethic that "more is better." And beyond that, after two years of concentrated effort, we have concluded that no substantial benefits would result from continued growth of the nation's population.*

*The "population problem" is long run and requires long-run responses. It is not a simple problem. It cannot be encompassed by the slogans of either of the prevalent extremes: the "more" or the "bigger the better" attitude on the one hand, or the emergency-crisis response on the other. Neither extreme is accurate nor even helpful."*[257]

If that is what they had decided for America, then depopulation was certainly what they had decided for Latin America too. The Rockefeller brothers had dedicated themselves to the depopulation agenda since they had set up their fund in 1951 and were even more focused on the issue in 1969 and 1970 when the Mission to Latin America took place and the Population Report was being drafted at home. The Nixon administration, aided by the Rockefeller brothers, Robert McNamara and Henry Kissinger, had made depopulation the core of America's foreign and domestic policy and fluoridation was their secret tool both at home and abroad; a secret odious enough to be shared only with heads of state in face-to-face discussions.

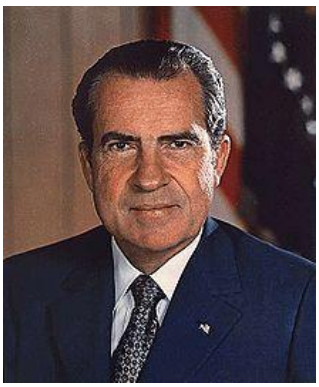
## No. IX - National Security Study Memorandum (NSSM 200) - 1974

The National Security Study Memorandum commissioned by President Nixon and authored by Henry Kissinger, a Rockefeller protégé and National Security Advisor to Nixon, solidified the US government's commitment to population control.

[257] Population and the American Future: The Report of the Commission on Population Growth and the American Future, 1972, http://www.population-security.org/rockefeller/001_population_growth_and_the_american_future.htm.

Its explicit subject, *"Implications of Worldwide Population Growth for U.S. Security and Overseas Interests"*, signals the importance the issue of population control had acquired for US foreign policy and the presidential agenda. Its projections and conclusions are justifications for depopulation measures already in place and provide the rationale for continuing the depopulation agenda and expanding it.

The Study assesses *"the likelihood that population growth or imbalances will produce disruptive foreign policies and international instability"* and contemplates the best course of action for the United States, which, in its view, is to focus international attention on the population problem, pursue technological innovations to reduce population growth, and improve assistance to other countries through bilateral, multilateral and private agencies.



NSSM 200 is the political pillar on which the US government has expanded its domestic water fluoridation program to encompass 75% of the population, and the combination of water (both bottled and tap), salt and milk fluoridation to depress the fertility rates of most countries on earth.

## No. X - INTERNATIONAL CONFERENCES ON POPULATION – 1970 to present

The **First World Population Conference** was held in Rome, Italy, in 1954 and was organized by the United Nations. Its purpose was to exchange scientific information on how population growth will evolve, why and what the consequences would be. It resolved to gather accurate demographic data for developing countries and to create regional training centers for specialists in demographic analysis to start gathering the necessary data.

The **Second World Population Conference** was held in Belgrade, Yugoslavia, in 1965 and was organized by the International Union for the Scientific Study of Population (IUSSP) and the United Nations. Its subject was the analysis of fertility and the incorporation of fertility in policy making for development planning. *"This Conference was held at a time when expert studies on the population aspects of development coincided with the start-up of population programmes subsidized by the United States Agency for International Development (USAID)."*[258]

The **Third World Population Conference** was held in Bucharest, Romania, in 1974 and was organized by the United Nations. It was the first intergovernmental conference on population and was attended by 135 countries. Its focus was on the relationship between population issues and development; the exact subject dealt with by the Rockefeller Population Report in 1969 and

[258] Outcomes on Population, http://www.un.org/en/development/devagenda/population.shtml.

the Kissinger Memorandum 200 of 1974, indicating clearly who set the pace and the agenda of population control. In Bucharest it was decided on a World Population Plan of Action whose aim is the development of countries minding that population and development are interdependent and therefore population policies and objectives must be constituent elements of socio-economic development policies.

The fourth conference was held in Mexico City in 1984 and for the first time it was called the **International Conference on Population**, indicating that population control had acquired international support and was now an issue of global concern. Human rights were discussed to soften the principal subject of the conference, namely the intensification of international cooperation and the pursuit of greater efficiency in adopting policy decisions relating to population.

The fifth gathering was held in Cairo, Egypt, in 1994 and was titled the **International Conference on Population and Development**. Nearly every member state of the UN participated, over 180 states in all. In Cairo a new Programme of Action was adopted that recognizes the indissoluble relationship between population and development and sets the stage for the next 20 years. To deflate growing international criticism this so-called "new" plan of action is purportedly intended to pursue demographic goals while respecting human rights. It is in other words an indirect recognition that the depopulation agenda has been trampling on human rights to the point of invalidating them. At the same time it *"marks a new phase of commitment and determination to effectively integrate population issues into socio-economic development proposals and to achieve a better quality of life for all individuals, including those of future generations."*[259]

In keeping with the promise to intensify population control measures, the UN did not wait ten years before assembling the world again to assess progress and set targets. In 1999, just five years after Cairo, the UN called a special session of the United Nations General Assembly (General Assembly 21st Special Session) *"to review and appraise the implementation of the Programme of Action adopted at the 1994 conference."*

A bird's eye view allows us to see how the depopulation agenda has proceeded since its inception in 1945: first, it gathered the numbers; second, it mixed fertility with development; third, it set its depopulation goals; fourth, it built the necessary infrastructure; fifth, it co-opted governments; and sixth, it set to work.

The conferences described above are the grand ballroom events on population and represent the international and official face of population control. But this is only a third of the story, the public and official version. The second part of this alliance is made up of privately funded organizations and NGOs that depend on funds funneled by depopulation organizations, individuals, and governments either directly or indirectly. And the third part, the hidden and

[259] Ibid.

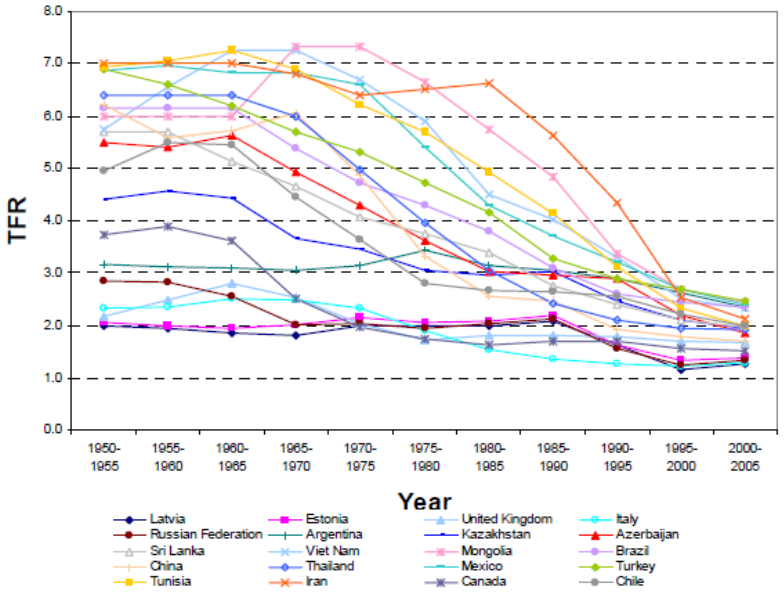
unofficial side of the depopulation agenda occurs behind closed doors in highly confidential discussions between high officials of the UN, US and EU and heads of state throughout the world.

Behind the polite and legalistic façade of the UN conferences and the encoded statements of Rockefeller's Population Council hides a different story of how fertility rates have been drastically reduced throughout the world. That story is the story of fluoridation, the world's only effective depopulation measure until the invention of genetically modified organisms (GMOs). For the reality is that the dissemination of contraceptives, the surgical sterilization of men and women, education for women and their incorporation in the workforce, economic development and better health care amount to just a drop in the bucket when it comes to reducing fertility rates and crude birth rates. The only method that has universal impact is fluoridation, preferably water but in its absence salt and milk fluoridation do the job too.

The proof is in the pudding, as they say. The keenest depopulation countries are those that have already reached low-fertility and even lowest-low fertility. The graph below shows some of them and the trajectories of their TFR lines betray the year when they began fluoridating their people. Estonia and Latvia are at the bottom of the pile. As newly occupied Baltic republics under Soviet yoke they and Japan incurred fluoridation in 1945, right at the end of the war.

The UK, Italy and Russia are above Estonia and Latvia. Their graph lines show that after World War II their fertility rates grew until fluoridation was introduced; for the Soviet Union in 1955, the UK in 1960 and Italy in 1965, at which point their TFR lines began to dive. Mongolia and Iran are at the top of the graph because they started with the highest birth rates, 7.3 and 6.7 respectively, which began diving rapidly in 1975 for Mongolia and in 1985 for Iran.

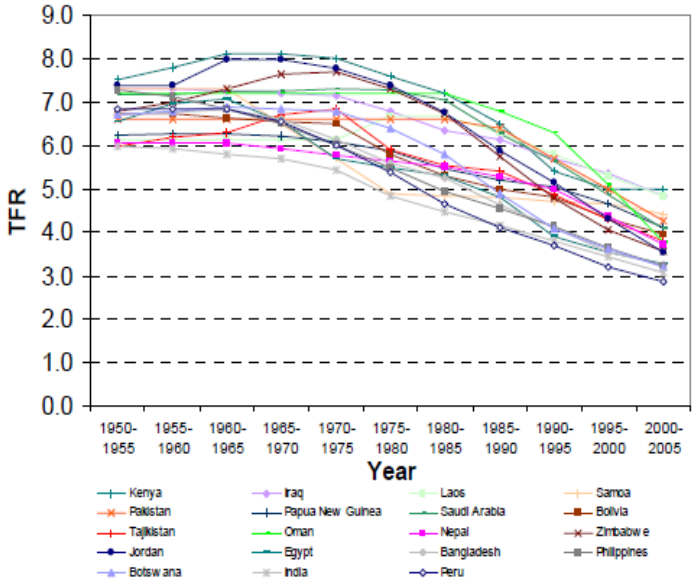
**Figure 2.8 Low-fertility Countries, 1950-2005**




*Source:* UN 2004.

Medium fertility countries are those that have reluctantly adopted depopulation measures and as a result have had only limited success in lowering their birth rates. Most started fluoridation around 1970-1975, with the exception of Oman which started in 1980-1985, and Pakistan which did not begin until 1985-1990. Iraq, Jordan and Saudi Arabia started the earliest in 1960-1965. The reason their fertility rates did not drop to replacement level is because they did not have the political will necessary to either expand fluoridation outside their largest cities or continue the policy in an uninterrupted manner.

**Figure 2.6 Medium-fertility Countries: Trends in Fertility Decline, 1950-2005**




*Source:* UN 2004.

Most of them have been hampered by poor infrastructure and large proportions of rural people who cannot be reached by water fluoridation because they lack running water and water treatment plants. Their poverty, in other words, has been their best protection from poisoning by fluoride, which lends new meaning to the axiom 'God loves the poor'.

The eugenicists have probably been unable to reach these countries with salt fluoridation because the production of salt is highly decentralized and mostly of local or regional origin. Milk fluoridation is even more difficult as it requires quick delivery after fluoride is mixed in. Powder milk is the exception but these countries do not have a tradition of drinking milk which is why powder milk consumption could not be promoted in advance of fluoridation, as Chile has done.

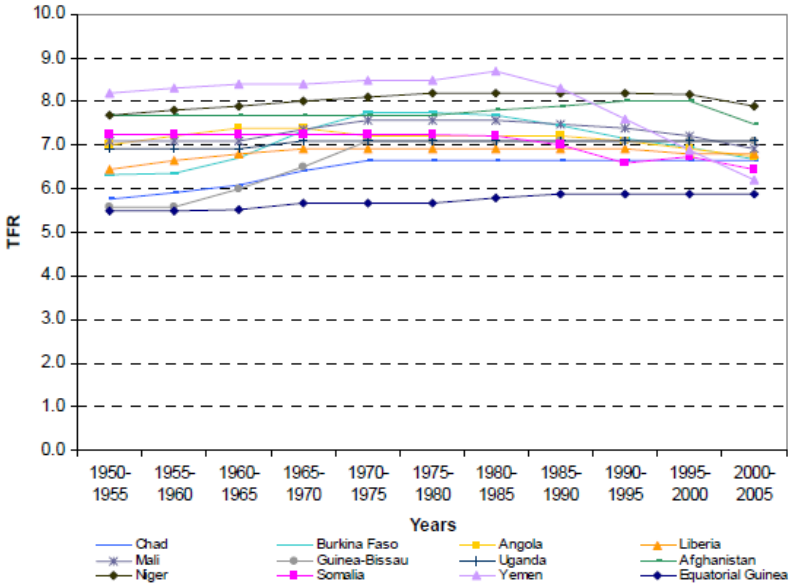
The high fertility countries in the graph below are the usual suspects in Africa and the proud and unconquerable people of Afghanistan all of whom have resisted fluoridation or have been

protected from it by poor infrastructure. Their poverty and independence from the "generosity" of the international community have been their salvation.

One can be certain that after the American invasion of Afghanistan the city of Kabul became one of the most intensely fluoridated cities in the world.

Yemen appears to be the only one among the countries represented in this graph to have adopted fluoridation around 1980 to 1985. This was undoubtedly the doing of President Ali Abdullah Saleh who took power of the Yemen Arab Republic in 1978, was re-elected in 1983 and who has been cozy with the Americans ever since.

**Figure 2.4 High-fertility Countries: Trends in Fertility Decline, 1950 -2005**




*Source:* UN 2004.

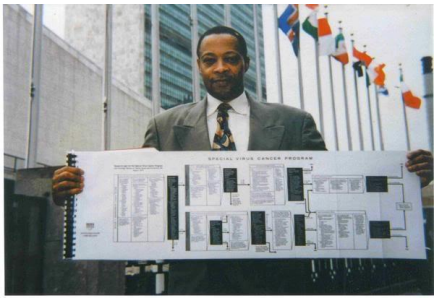
But Africa's TFR tells only half the story, the story of births. It does not tell the story of deaths. Population control, the eugenicists have always understood, can be accomplished twofold, by limiting the number of people born into the world or by artificially increasing the number of deaths, the mortality rate of a population. And what better way to achieve that than by creating a killer virus. And thus we get to AIDS.

## HIV/AIDS – BIOLOGICAL WARFARE AGAINST AFRICA AND THE WORLD

Since African leaders have not collaborated with the depopulation agenda, or the people have been protected from fluoridation programs by poorly developed infrastructures, the eugenicists have unleashed biological warfare on the people of Africa by developing **HIV**, the **human immunodeficiency virus**, a virus specifically designed to have an affinity for people of color. Dr. Boyd E. Graves, the man who exposed the man-made origin of HIV and traced it back to the United States Special Virus Program (1962-1978), explains:

> *"What the science and medical evidence concludes is that the HIV enzyme seeks out a receptor site in the blood of the Black genome. The receptor site is the CCR5 Delta 32+ (positive) gene that all people of color have. In the same sense, on the other end of the spectrum, is the 15 percent Caucasian population of the world, which is CCR5 Delta 32-(negative) gene. That means that under no circumstances, whether HIV came through the air, intravenous drug usage or any form of the sexual activity, would the virus be transferable in this sector of the world's population, which is basically of northern European descent."*[260]

The United States Special Virus Program (1962-1978) was a highly classified initiative to develop a contagious cancer that selectively kills based on the genetic ethnic markers of the host. To this end, animal viruses were manipulated to infect human hosts and progress reports were made by the scientists in charge, Dr. Robert Gallo and Dr. Duesberg, as they worked towards their contracted goal to create the desired killer virus.



Conclusive evidence of the program's existence and that HIV was indeed an American creation was brought forth in 1999 by Dr. Boyd E. Graves who discovered a 1971 AIDS flowchart (see adjacent photo). The flowchart is a visual representation of the virus program. In 2008, a secret 1967 U.S. Special Virus Program Progress Report was also unearthed through a Freedom of Information request.

This Report brings together over 20.000 scientific papers and fifteen years of progress reports of the federal virus development program and proves that its intended goal was to thin the world's black population. The record also reveals that the AIDS program was a cooperative effort between the United Sates, which was represented by Dr. Robert Gallo, and the Soviet Union, which was represented by Dr. Novakhatsky of the Ivanovsky Institute.[261]

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[260] AIDS is man-made: Interview with Dr. Boyd Graves, by FINALCALL.COM, 5 October 2004, http://www.finalcall.com/artman/publish/Perspectives_1/AIDS_is_man-made_-_Interview_with_Dr_Boyd_Graves_1597.shtml.
[261] The U.S. Special Virus, http://www.boydgraves.com/flowchart/.

Having created a killer virus designed to depopulate Africa and having introduced it into the population, the eugenicists had to ensure that no cure is allowed to see the light of day and stop the depopulation progress they had made in Africa where infection is as high as 30%. On 14 October 1997, Dr. Marvin S. Antelman, patented a "Method of Curing Aids with Tetrasilver Tetroxide Molecular Crystal Devices" (U.S. Patent 5,676,977) and in 2001 Dr. Boyd E. Graves was the first American to be treated with Tetrasil.[262]

> *"Almost immediately, Graves health began recovering from years of damage inflicted by the 'special HIV virus' and he became an outspoken proponent of the Tetrasil treatment demanding immediate clinical trials and worldwide accessibility for people living with HIV and dying of AIDS. Soon afterward Tetrasil was recalled by the patent owner/manufacturer, Dr. Marvin Antleman and Antleman Technologies, Inc. without public explanation. Graves took his experiences and requests to Congress, General Accounting Office, the Centers for Disease Control, United Nations, World Health Organization, and several Ministers of Health around the world with varying degrees of success including China, the UK, and several African countries where he was widely revered and respected as the 'Man Who Solved AIDS'."*

Dr. Graves did not know why he was ignored by US, UN and health authorities around the world. He did not know that HIV was an integral plan in the depopulation agenda to which nearly every government in the world has signed up and that no government in the world has exposed either out of fear or self-interest. Not knowing that the judiciary is intimately involved in the depopulation agenda, Dr. Graves sought justice in the courts and in September 1998 he launched the first legal action in US federal court with the intent to present evidence that HIV is synthetic. He was armed with evidence that on 9 June 1969, the Subcommittee of the Committee on Appropriations in the House of Representatives, which was responsible for Department of Defense (DOD) appropriations, approved $10 million to the DOD to develop HIV.[263] The Secretary of Defense at that time, and responsible for approval of the 1969-1970 budget, was, of course, Robert McNamara

The virus was subsequently distributed throughout Africa, Brazil and Haiti by the World Health Organization through its program of immunization against smallpox which ended in 1980. A 1987 London Times article reported:

> *"The smallpox vaccine theory would account for the position of each of the seven Central African states which top the league table of most-affected countries; why Brazil became the most afflicted Latin American country; and how Haiti became the route for the spread of Aids to the US. It also provides an explanation of how the infection was spread more evenly between males and females in Africa than in the West and why there is less sign of infection among five to 11-year-olds in Central Africa.*

[262] Understanding Tetrasil, http://www.scribd.com/doc/29091515/Understanding-Tetrasil-Ag4O4-the-AIDS-cure-patent-and-dosage-progress-diary.
[263] AIDS Report: The Man Made Plague, http://whatreallyhappened.com/WRHARTICLES/AIDS3.html?q=AIDS3.html.

*Although no detailed figures are available, WHO information indicated that the Aids league table of Central Africa matches the concentration of vaccinations. The greatest spread of HIV infection coincides with the most intense immunization programmes , with the number of people immunized being as follows: Zaire 36,878,000; Zambia 19,060,000; Tanzania 14,972,000; Uganda 11,616,000; Malawai 8,118,000; Rwanda 3,382,000 and Burundi 3,274,000.*

*Brazil, the only South American country covered in the eradication campaign, has the highest incidence of Aids in that region. About 14,000 Haitians, on United Nations secondment to Central Africa, were covered in the campaign. They began to return home at a time when Haiti had become a popular playground for San Francisco homosexuals.*

*Although detailed figures of Aids cases in Africa are difficult to collect, the more than two million carriers, and 50,000 deaths, estimated by the World Health Organization are concentrated in the Countries where the smallpox immunization programme was most intensive.''*[264]

Dr. Boyd E. Graves' lawsuits went nowhere in federal court or higher courts. The Supreme Court refused to hear Dr. Graves' lawsuit without comment, iron proof of the judiciary's commitment to the depopulation agenda and its complicity in murdering countless millions.

While the eugenicists are stonewalling judicial proceedings and erasing medical cures, Africa has become synonymous with the AIDS pandemic. There are now some 33 million HIV-positive Africans and the number will increase to 50 million by 2025 even if an HIV vaccine were to be developed. Currently, 30 million Africans need anti-retroviral treatment but only a small minority receive any treatment at all since Western-owned pharmaceutical companies refuse to allow their drugs to be produced cheaply in the developing world and keep the prices astronomically high to ensure that few Africans can afford treatment.

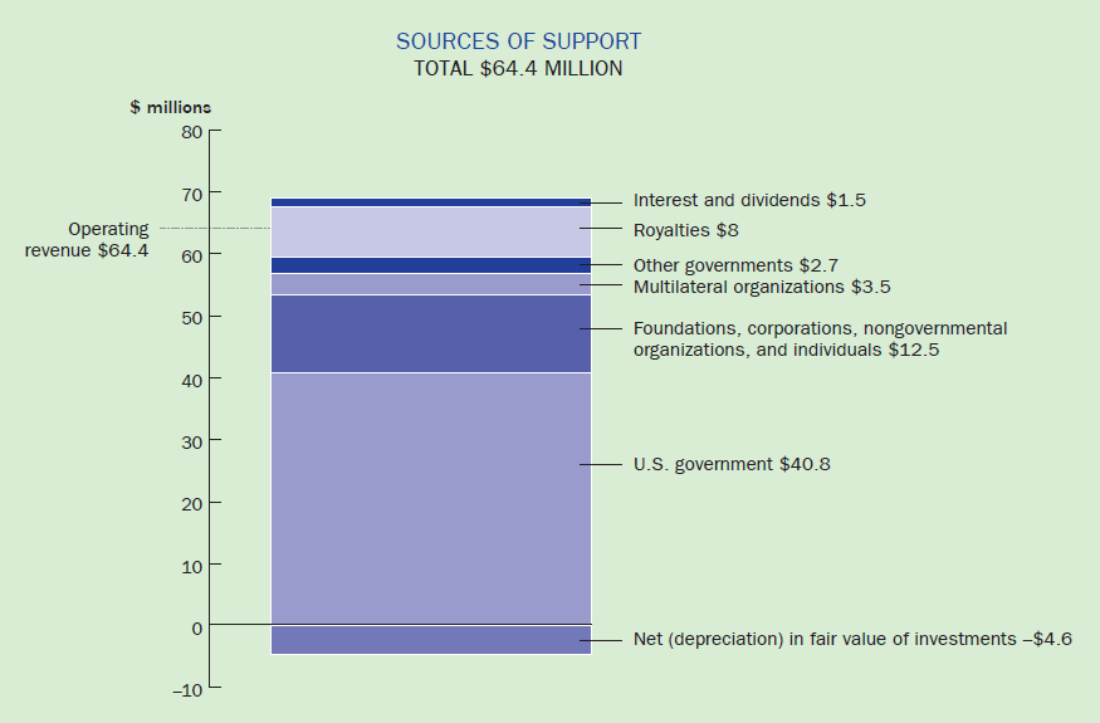
*

Fluoridation is behind the ties that bind America with every dictator and petty monarch in the world and explains why its foreign policy has been incomprehensible in its double standards to observers and critics who do not know about the deadly secret they share. For once the US convinces a head of state to start murdering his own citizens with fluoride it is bound to support him through thick and thin.

[264] Pearce Wright, *Smallpox vaccine 'triggered AIDS virus*, London Times, 11 May 1987, http://voices.yahoo.com/london-times-smallpox-vaccine-triggered-aids-virus-866397.html

Another reveling aspect of who drives the depopulation agenda is provided by funding. Let us now follow the money.

In looking at the 2011 annual report of Rockefeller's Population Council, it becomes clear that the vast majority of the money that fuels this presumably private non-profit organization is US government money; $40.8 million of a total operating revenue of $60.4 million to be exact.




Donations from individuals are insignificant and are mixed together with money from foundations, corporations and NGO for a modest total of just $12.5 million.

This means that it is the US government that hides its population control ambitions behind the Rockefeller name, which is tainted by accusations of eugenics, and not vice versa. What this also suggests is that the officialdom behind the depopulation agenda has encouraged racist conspiracy theories that point the finger to Jews, the British aristocracy and the Vatican in order to obfuscate the true nature and the real players behind global depopulation measures.

## TOP 20 DONORS TO UNFPA*

CONTRIBUTIONS IN US$

| DONOR | REGULAR CONTRIBUTIONS[1] |
|---|---|
| Netherlands | 73,600,540 |
| Sweden | 60,564,947 |
| Norway | 54,133,377 |
| United States | 51,400,000 |
| Denmark | 37,124,230 |
| Finland | 33,738,192 |
| United Kingdom | 30,227,803 |
| Japan | 25,438,946 |
| Spain | 21,419,009 |
| Germany | 19,498,937 |
| Canada | 17,059,980 |
| Switzerland | 14,462,810 |
| Australia | 7,311,852 |
| Belgium | 6,399,477 |
| New Zealand | 4,423,800 |
| Ireland | 3,663,004 |
| Luxembourg | 3,576,248 |
| France | 2,294,197 |
| Austria | 1,826,639 |
| Italy | 1,400,560 |

| DONOR | OTHER CONTRIBUTIONS[2] |
|---|---|
| UN Inter-Organizational Transfers[3] | 93,009,657 |
| United Kingdom | 67,612,315 |
| Netherlands | 46,010,410 |
| Spain[4] | 23,430,664 |
| Sweden | 13,528,751 |
| European Commission | 12,314,803 |
| Norway | 11,553,437 |
| Australia | 10,192,437 |
| United States Agency for International Development | 5,918,717 |
| Luxembourg | 5,914,290 |
| Colombia | 5,087,956 |
| Germany | 3,310,969 |
| Japan | 2,499,800 |
| Uruguay | 1,659,392 |
| United Nations Fund for International Partnerships | 1,595,808 |
| Côte d'Ivoire (African Development Bank) | 1,563,435 |
| Denmark | 1,561,809 |
| Italy | 1,417,444 |
| Canada | 1,417,031 |
| Finland | 1,191,467 |

1 Contributions for regular resources for 2010
2 Cash contributions received for co-financing resources in 2010
3 Includes Joint Funding Mechanisms: Office of the Coordination of Humanitarian Affairs, including Central Emergency Response Fund (CERF): $10.7 million, Joint Programmes that follow United Nations Development Group (UNDG): $26.3 million, United Nations Human Security Trust Fund: $1.7 million, Regular Joint Programmes: $31.3 million, and bilateral transfers from United Nations Entities: $22.9 million.
4 Includes Spain (Catalonia) Contributions
* Contributions valued in US$ at the time they were received using the United Nations Operational Rate of Exchange (arranged by descending order). ALL FIGURES ARE PROVISIONAL. Interim report prepared 30 March 2011 is based on preliminary data.

This, of course, is the best way to hide the obvious and to confuse the populace. It is also the best way to drown voices of dissent amidst accusations of conspiracy theories, making critics vulnerable to psychological attack by undermining their credibility with accusations that they are mentally unstable.

In the face of growing resistance to increasingly abusive government actions and the obvious collapse of the rule of law, more often than not attacking a critic's or a whistleblower's mental health has become the modus operandi of national and international bodies desperate to hide their crimes. This method of suppression is particularly popular in Canada and the UK and I suspect the same is true throughout the British Commonwealth since they all take their cues from England.

The ugly reality is that depopulation by fluoridation is not a crime of race but a crime of science. It is science that rules now and those who wield it have proven to be more devoid of scruples and more soulless than the kings of the past or even the Catholic Inquisition. None of these past criminals made children their main targets. Today's scientists and politicians have no hesitation to chemically burn us and our children to extinction on a bond fire whose flames have engulfed the world, all the while the high priests of government and international organizations chant their diabolical incantations in the language of science, with graphs and percentages, equations and projections that are crueler in their intent and logic than the most cruel dictator and more destructive than the most destructive conventional weapons. It is not soldiers who kill in our modern days; it is doctors and scientists, administrators and politicians, lawyers and judges, pencil pushers

and lab coats, the very people we entrust with our lives, with our freedoms and with our wellbeing.

How about the United Nations Fund for Population Activities (UNFPA), where does it get its money? In 2010 it received a total of $876 million from 21 donors. 75% of that money came from Europe, 10% from other UN agencies, 6.5% from the U.S., 4.5% from Canada, Australia and New Zealand combined; 3% from Japan, and the remaining 1% from Columbia and Uruguay. In other words, from the nations that drive the fluoridation agenda and that have used it on their own people first. Japan, I suspect, has been dragged into this by the US and is an unwilling contributor, unless of course that money goes to China, in which case Japan would gladly donate far more.

By far the largest contributors to the depopulation agenda, both in real and proportional terms, are the Netherlands (13.7%), the UK (11.2%), Sweden (8.4%), Norway (7.5%), Denmark (4.5%), and Finland (4%). By comparison Germany, which is Europe's largest economy, contributes a paltry 2.6%. Clearly Germany, like Japan, is being dragged into the global depopulation programme reluctantly, having been on the receiving end of depopulation measures for the past 60 years, whereas the Scandinavian countries, the Netherlands and the UK are motivated by the desire to contain Germany and by delusions of genetic superiority vis-à-vis non-Caucasian peoples.

And who are the fortunate beneficiaries of all that generosity? Well, Sub-Saharan Africa gets 37%, Asia and the Pacific 26%, Latin America and the Caribbean11%, Arab States 7%, Eastern Europe and Central Asia 5%, and the rest of the world 14%.

Per country Sudan steals the cake in the Arab region; Haiti in the Caribbean; Columbia in Latin America (though I fail to understand how Columbia can donate $5 million and receive $9.8 million in return); Pakistan in Asia; and Ethiopia in Africa. What these countries have in common (except Columbia, which probably funnels the money elsewhere or uses it to poison the coca fields from the air) is high fertility rates, which is why the UN is interested in them.

## No. XI - CODEX ALMENTARIUS AND MULTIAGECY COORDINATION – 1970 on

The coup de grace of the population control lobby was the designation of fluoride, which is a highly toxic substance, as an essential mineral for dental and skeletal health. This opened the door to its use as an additive to food and water. The Codex Alimentarius – the UN's book of standards and codes, guidelines and recommendations related to food, food production and food safety – is the vehicle through which the UN elevated fluoride to the status of a useful mineral.

The text of the Codex Alimentarius is developed by the Codex Alimentarius Commission, a UN body that was established in 1963 by the Food and Agricultural Commission (FAO) of the

United Nations and the World Health Organization (WHO). The designation of fluoride as a mineral with nutritional value by the FAO and the WHO and its entry into the Codex Alimentarius created a legal pathway for the implementation of water, salt and milk fluoridation since the Codex is used by the World Trade Organization as the international reference point for the resolution of disputes concerning food safety and consumer protection. National courts could thus be overruled in respect to fluoride use by the highly political and controlled decisions of the World Trade Organization.

With this legal instrument in hand to promote fluoride as a mineral, the depopulation lobby found a new avenue to expand fluoridation as a nutritional measure and package it together with truly essential nutrients under health guidelines for the food production industry. To better coordinate the global implementation of fluoridation all essential agencies of the depopulation agenda created distinct and separate departments within their larger structures under the ambit of health, nutrition and population.

The World Bank's fluoridation department is called the Department of Health, Nutrition and Population (DHNP); the United Nations' is called the Health, Nutrition and Population Sector Programme (HNPSP) and is part of the UN's Economic and Social Council; and finally the World Health Organization's is called the Department of Nutrition for Health and Development (NHD).

What all these departments have in common is the amalgamation of health, nutrition, population and economic development. What they separately have to offer is a different angle from which to push fluoridation: the World Bank uses the financial angle, the WHO the health angle, the FAO the nutrition angle, and the UN's Economic and Social Council the social angle. They thus create a thoroughly artificial synergy through which legitimate research and national health organizations that attempt to protect their citizens by pointing out the ill-effects of fluoride are overwhelmed and pushed into the background. That is how concerned scientists have been silenced and national health organizations have been made invisible and irrelevant.

These agencies form the peak of the international hierarchy that oversees, regulates, funds and implements policies that are supposed to ensure our health and wellbeing but that in fact undermine our reproductive health, severely damage our general health, and cause the gradual extinction of our genetic lines by making it impossible for us to procreate. These agencies are now present in 170 countries and are working overtime to achieve our extermination.

They are joined by a dizzying array of privately funded non-profit organizations such as the Global Alliance for Improved Nutrition (GAIN), the Development Assistance for Health (DAH), the Population Environment Research Network (PERN), the Population Association of America (PPA), the Insitut de Formation et de Recherche Demographique (IFORD), the International Union for the Scientific Study of Population (IUSSP), and hundreds of others.

## No. XII - MILLENNIUM DEVELOPMENT GOAL V

The Millennium Development Goals (MDGs) were set at the 2000 Millennium Summit to accelerate global progress in development. The United Nations recognizes that sexual and reproductive health is a prerequisite of all other goals and depopulation has been enshrined in millennium development goal nr. 5b, which pursues fertility targets through any and all means, including fluoridation, under the cover of providing contraceptives.

The WHO has been put in charge of monitoring progress on the fertility reduction front. In its Briefing Note on Achieving Millennium Goal 5 the WHO declares:

> *"During the sixty-first World Health Assembly in May 2008, Member States resolved to include the monitoring of the achievement of the health-related MDGs as a regular item on the agenda of the Health Assembly and requested the Director-General to submit a report annually on the status of progress made, according to the new MDG framework, in which monitoring universal access to reproductive health is now a target."*[265]

To ensure seamless cooperation between the many depopulation bodies, the Department of Reproductive Health and Research was created to include the United Nations Development Programme (UNDP)[266], UNFPA, WHO and the World Bank, which has set up a Special Programme of Research, Development and Research Training in Human Reproduction to liaise with the UN agencies. This entire nest of wasps is located in Geneva (Avenue Appia 20), Switzerland, on the property of the World Health Organization.

Coordinating the worldwide fluoridation agenda has therefore passed from American hands into UN hands. This has freed the U.S. to concentrate on depopulation through genetically modified organisms, which are intended primarily for the Africa, but also for Latin America as well as parts of Asia.

## No. XIII – EXECUTIVE DECISION 'THE FINAL SOLUTION'

This section merits a book of its own but there is no time to give it proper attention. I will therefore be succinct.

Sometimes during the Presidency of George Herbert Walker Bush (1989-1993) an executive decision was made that the global population must be brought down to at most 2 billion before the world runs out of fossil fuels towards the end of the 21st century, at which point fertilizers

[265] Achieving Millennium Development Goal Five, http://whqlibdoc.who.int/hq/2009/WHO_RHR_09.06_eng.pdf.

[266] The UNDP was founded on 22 November 1965 with the merger of the Expanded Programme of Technical Assistance (EPTA) and the United Nations Special Fund, to avoid duplication of their activities. The EPTA was to help the economic and political aspects of underdeveloped countries while the Special Fund was to enlarge the scope of UN technical assistance.

will no longer be available and modern agriculture will come to a sudden stop causing mass hunger, mayhem, death and the collapse of human civilization.

To pre-empt such catastrophe the US government and its allies decided to pursue more rapid and drastic depopulation measures through genetically modified organisms (GMOs) that cause infertility across the board. Unlike fluoridation, which lowers fertility to the desired level by playing with the fluoride concentration and by accident more than design renders some 30% infertile, the consumption of genetically modified organisms renders many infertile within one generation and makes all irrevocably infertile within three generations according to Russian scientists and American farmers who have observed this on lab animals and domestic herds.

9/11 was the catalytic event planned and executed for the purpose of solidifying the commitment of world leaders to an agenda that is irreversible and that will lead to the extermination of the vast majority of the human race. It was also indisputable proof of America's commitment to the Final Solution. Moreover, it made possible the subsequent imposition of de facto martial law throughout the world, which has since been used to scare into silence anyone who exposes state secrets and to classify over 16 million documents that could enable astute analysts and investigators to connect the dots.

To pull off such an audacious and diabolical plan, however, the masterminds realized that if one third of humanity is spared they will eventually turn on the leadership once it becomes obvious what has happened. Furthermore, it would be difficult to protect 2 billion people from GM contaminated food while targeting the other 5 billion. The only survivors, therefore, it would have been decided, will be those whose food is estate-grown and protected from GM contamination, thus a very small minority.

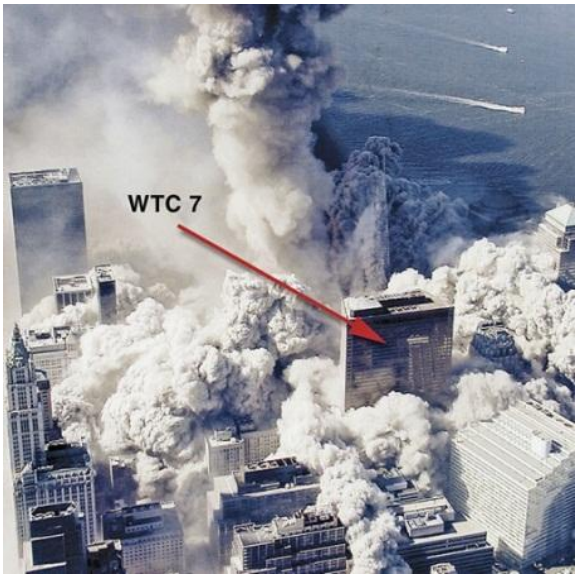
George Bush Sr. was just the man to approve such an inconceivably satanic Final Solution. He had served as Director of Central Intelligence from 1976 to 1977 and as U.S. Ambassador to the United Nations from 1971 to 1973 and had therefore the trust of the intelligence community and of the United Nations, the two bodies tasked with defending and implementing the depopulation agenda. As a former oil man he also had connections to the wealthy oil states of the Arabian Peninsula, especially Saudi Arabia. Moreover, he is the grandson of Prescott Bush who in 1932 convened the first international eugenics conference in America.

Bush, however, lost the 1992 presidential election to Democrat Bill Clinton (1992-2001) and full implementation of the Final Solution had to wait until Bush Junior became President. Or, judging by Clinton's enthusiastic support for genetically modified organisms, the launch of the Final Solution was scheduled for the start of the new millennium.

When George W. Bush Junior declared on TV in the aftermath of 9/11 *"you are either with us or with the enemy"*, he was not addressing the people but the world's leaders, coalescing them to

the cause and intimating annihilation should they so much as whisper anything about the Final Solution. And by the 'enemy' he did not mean Muslim Fundamentalists, since they have nothing to do with 9/11, but us the world's people who have been the target of chemical warfare for the past 70 years.

9/11 was an international effort that involved Muslim, Jewish and Christian leaders. It was a false flag operation to which the Saudis furnished the money and the people, the Pakistanis the intelligence and Osama bin Laden's hideout, the Israelis the explosives and the agents to detonate them, American Jews the buildings and the propaganda, the American government its soil, planning and technology, and the rest of the world's leaders their tacit consent and the media manipulation.[267] That the collapse of the twin towers and the WTC 7 building were controlled demolitions is now a well-established fact.




Equally clear is that the Pentagon was not pierced by a plane but a missile. The evidence of foul play is solid and has been documented by credible experts in various fields. It is not my intent to repeat here what others have already covered, but to place the 9/11 incident in perspective and within the framework of the global depopulation agenda.

Switzerland again plays a role as it houses Europe's GM seed and fertilizer companies. Norway houses the seed bank that holds the world's natural seeds on one of its remote islands near the Arctic Circle and that will come out only when the world is depopulated, at which time all genetic plants will be eradicated and the eugenicists will start again with a clean slate and with natural plants.

The Bill and Melinda Gates Foundation, which is deeply involved in GMOs and depopulation, along with several governments have paid for the seed bank and the project was initiated by the United Nations Food and Agriculture Organization (FAO).

[267] 911Truth.org, http://www.911truth.org. See also 9/11 documentaries & videos at http://www.911docs.net/.

The Svalbard Global Seed Vault is a secure seed bank located on the Norwegian island of Spitsbergen in the remote Arctic Svalbard archipelago, about 1,300 kilometers (810 mi) from the North Pole.

The EU leadership is pushing GM foods on Europeans despite extraordinary opposition from the populace. The UK is also crucial as it aids the US in subduing the Arab world by hook and by crook – where opposition to fertility control is greatest – and in keeping Europe's academia, the media and EU organizations on message. The Monarchies of the Arabian Peninsula – Saudi Arabia, Qatar and the United Arab Emirates in particular – aid the UK in spanning a surveillance and censorship net across universities and media organizations with online operations and are housing and funding spy centers that embed false students in online university courses and shills in online social media websites to control the intellectual discourse, limit free speech, spawn conspiracy theories, discredit legitimate activists and prevent the truth from coming out and from being disseminated. I exposed an aspect of this program in 2010[268] and have been imprisoned five times since as well as separated from my children and property by force to the point where I had to leave Canada clandestinely and hide elsewhere as a dissident in exile to save my life.[269]

[268] Kevin M. Galalae, *The Great Secret: Surveillance and Censorship in Britain and the EU*, 25 October 2010, available at: https://wikispooks.com/w/images/4/4d/The_Great_Secret.pdf.
[269] The Oslo Times, Activist Flees Canada in Terror, http://theoslotimes.com/index.php?option=com_content&view=article&id=4134%3Aactivist-flees-canada-in-terror&catid=173%3Atot-case-files&Itemid=723

## A FEW WORDS ABOUT PHASE TWO OF DEPOPULATION – DEPOPULATION BY GENETICALLY MODIFIED ORGANISMS

To place genetically modified organisms outside the scrutiny of science and within existing food regulations, the elder Bush issued an executive order which ruled that GMO plants and foods are "substantially equivalent" to ordinary ones of the same variety. The principle of "substantial equivalence" became the lynchpin of the GMO "revolution", facilitating total control over food by corporations and governments dedicated to depopulation and now capable of creating Andromeda strains when and if it suits them.[270]

The GM agenda like the fluoridation agenda has racist undertones. The staple crops of the world's main racial groups have been monopolized through patents on life owned by Western corporations. There is now GM rice, Asia's main food; GM corn, Latin America's main food; GM sweet potatoes, cassavas and bananas, Africa's main foods; but no GM wheat, which is of course the main food of Caucasians. The primary motivation, however, is not race but fertility; Asia, Latin America and Africa being the world's overpopulation hotspots.

In 2002, Monsanto submitted an application to the US and Canada for the approval of a herbicide-resistant, genetically-modified wheat, but plans to introduce GM wheat in North America were abandoned in 2004. To date, no genetically modified wheat is grown anywhere in the world.

The ultimate tool of control and coercion is food since famine is the fastest way to starve excess population without social collapse and with marginal political repercussions. To ensure control over food, the US has pursued an aggressive policy to replace the most basic natural crops with genetically modified organisms (GMOs) that are subject to proprietary laws and rob farmers of the right to save and plant their own seeds, forcing them to purchase seeds every year from Western-owned corporations. Food independence, now lost for the first time in history, is synonymous with complete loss of national sovereignty and individual freedom.

National leaders have been deceived, coerced or convinced to drive their people to food serfdom to subscribe to the global depopulation agenda, solve their nation's problems at a stroke, and secure their own and their family's survival during the great extermination as well as a seat at the global governance table.

Since their introduction a decade and a half ago and twenty years of prior preparation, GM crops have taken over America's agriculture. As of 2011, 93% of soybeans are from transgenic seeds in the U.S. (73% globally), 86% of corn (26% globally), 93% of cotton (49% globally), 93% of canola (21% globally), 95% of sugar beet (9% globally).

To date, 80% of all processed foods in the US contain a GM ingredient. In only 15 years, from 1996 to 2011, the total surface of land cultivated with GMOs has increased by a factor of 94,

[270] William F. Engdahl, *Seeds of Destruction: The Hidden Agenda of Genetic Manipulation*, Global Research, 2007.

from 17,000 square kilometers (4,200,000 acres) to 1,600,000 $km^2$ (395 million acres). More than 10% of the world's crop lands were planted with GM crops in 2010. At this pace, the entire world will be GM seed dependent within three decades and GM contaminated within one.

Some 16.7 million farmers in 29 countries grew GM crops in 2011 in the following order of magnitude: United States, Brazil, Argentina, India, Canada, China, Paraguay, Pakistan, South Africa, Uruguay, Bolivia, Australia, Philippines, Myanmar, Burkino Faso, Mexico and Spain. 50% of all GM crops are currently grown outside the US.

While GM crops are fast replacing traditional or heirloom crops, the industry is controlled by only four American and two European corporate giants: Monsanto (USA), Dow (USA), DuPont (USA), Cargill (USA), Syngenta (Switzerland), Bayer (Germany), of which Monsanto is by far the most dominant with a 90% share of the US transgenic seed market. More alarmingly, the same players have acquired control of half the world's seed producers in only five years and are sole manufacturers and patent-holders of the fertilizers and proprietary herbicides GM crops require.

The global monopoly and rapid market share expansion of these six US and European owned companies was made possible with strong political, legislative and judicial support of the three branches of government in the US, as well as by the World Trade Organization (WTO) whose Trade-Related Aspects of Intellectual Property Rights (TRIPS) governing patent rules were written by the biotech industry and whose rulings are industry-friendly and ignore strong consumer sentiment and Biosafety Protocols. Moreover, the existing TRIPS agreement forces countries that hardly understand the scientific and ethical implications of patents on life to accept a slew of new biotech patents that turn life into commodities.

London Institute of Science in Society chief biologist, Dr. Mae-Wan Ho, gives several reasons why biotech patents are absurd and should be revoked. They are not inventions per se but expropriations from life; are hazardous to health and biodiversity; lack scientific basis to support their patenting since they are discoveries at best, are unethical because they *"destroy livelihoods and create unnecessary suffering in animals or are otherwise contrary to public order and morality"*, and often *"involve acts of plagiarism of indigenous knowledge and bio-piracy of plants (and animals) bred and used by local communities for millennia"*, and last they stifle scientific and medical research and innovation.[271]

To force the public to eat Frankenfoods, legislation in the US and Canada prevents their labeling so consumers cannot exercise choice between foods that have genetically modified, conventional or organic origins. To prevent research into the safety of GMOs, their environmental impact, crop yields and how they compare with conventional crops scientists are blocked from independent research on GM crops and regulators and farmers have to make crucial decisions

[271] Dr. Mae-Wan Ho, "Why Biotech Patents Are Patently Absurd - Scientific Briefing on TRIPs and Related Issues", February 2001, http://www.i-sis.org.uk/trips2.php

about them based solely on research sponsored and approved by the patent owning corporations. This gives corporations an absolute stranglehold on scientific research and the flow of scientific information.[272]

Opposition is growing, but although nearly 400 scientists from across the globe have sent an open letter to all governments calling for a ban on such patents, as well as a moratorium on GMOs for reasons of safety[273], legislators are not listening and the World Trade Organization and American courts continue to defend biotech patents on life and the interests of the corporations who own them.

Nearly three dozen American scientists have recently complained to the US Environmental Protection Agency (EPA) that the technology/stewardship agreements they have to sign in order to receive GM seeds for research *"inhibit them from doing research for the public good"* and that as a result *"no truly independent research can be legally conducted on many critical questions regarding the technology."*[274]

Not surprisingly, the biotech industry has great influence on research and much of what is done by the private sector and in universities depends on funding from industry. Research is biased in favor of the industry by the choice and design of the experiments, the selection of scientific data, and the exclusion of experiments that throw a negative light on GMOs. Even research councils are compromised by being told *"to concentrate their grants on work that will lead to "wealth creation", by which is meant the sort of research the industry wants done. Restricting the use of their seeds gives the biotech companies a veto on any research they cannot block through their control of funding."*[275]

Research that uncovers harmful effects of GMOs is suppressed worldwide. Scientists who attempt to publish such research – such as Árpád Pusztai of the Rowett Research Institute[276] – find themselves without a job, tenure or pension. In 1998, Dr. Pusztai, the foremost expert in the biotechnology field at the time, conducted the first ever independent experiment on GMOs by feeding rats transgenic potatoes and found that after only ten days they had smaller livers, hearts, testicles and brains than normally fed rats, as well as damaged immune systems and structural changes in their white blood cells making them more vulnerable to infection and disease and putting them at greater risk of cancer. More alarmingly, the changes persisted after 110 days, the human equivalent of ten years. In his book *"Seeds of Destruction",* William Engdahl has revealed that Dr. Pusztai was suspended within days and then retired from his position after direct pressure on the Rowett Institute by President Clinton via Prime Minister Blair.

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[272] Corporate Monopoly of Science, 8 April 2009, http://www.i-sis.0rg.uk/corporateMonopolyOfScience.php.
[273] *World Scientists' Open Letter to All Governments on GMOs*, Institute of Science in Society, http://www.i-sis.org.uk/list.php.
[274] US EPA Docket EPA-HQ-OPP-2008-0836,
http://www.regulations.gov/fdmspublic/ component/main?main=DocumentDetail&o=090000648084de39
[275] Corporate Monopoly of Science, 8 April 2009, http://www.i-sis.0rg.uk/corporateMonopolyOfScience.php.
[276] Randerson, James (15 January 2008). "Arpad Pusztai: Biological divide". *The Guardian* (London).
http://www.guardian.co.uk/education/2008/jan/15/academicexperts.highereducationprofile.

Washington was at the time spending billions promoting biotech crops and a future biotech revolution and did not want its strategy for global control and depopulation ruined.[277]

Other scientists lose their funding or have their research quickly discredited by peers funded by the industry. In 2009, Vendômois and his colleagues found that GM corn developed by Monsanto causes liver, kidney and heart damage in mammals, only to have their research discredited by establishment scientists.[278]

Similarly, microbial ecologist at the University of California, Berkeley, Dr. Ignatio Chapela, published research in 2000 which showed that 6% of the maize in Oaxaca, Mexico, where corn is considered sacred and is the people's main staple, was contaminated with GM corn despite a 1998 ban. Monsanto hired a Washington-based public relations firm to discredit Professor Chapela's findings and get them retracted. Legal threats and US and Mexican government pressure forced Nature, the magazine that published Dr. Chapela's research, to retract part of his findings. The mainstream media was then unleashed on Professor Chapela to denounce his incompetence and vilify him, giving UC Berkeley's administrators the cover they needed to deny him tenure in 2003 on account of his article and for criticizing the university's ties to the biotech industry. This happened despite the fact that in April 2002, the Mexican government announced that 95% of the corn fields tested in the states of Oaxaca and Puebla had massive genetic contamination of traditional corn varieties; news that confirmed Dr. Chapela's research and made headlines in Mexico and Europe but were duly ignored in the US and Canada.

Of course, the genetic pollution of Mexico's corn did not happen by accident but by design, which is why NAFTA regulations at the time allowed imported US corn with 30% genetically modified content. The depopulation planners knew that once Mexico's corn was contaminated the ban on GM corn would be lifted as the damage was already done and irreversible. Once Mexico opened its doors to GM corn all other Latin American countries would follow and one of the fastest growing populations in the world would be stopped in its track with its main staple food.

What the US government and its biotech corporations have always known and never disclosed is that GMOs cause infertility, which is, of course, the primary reason they promote them. It took Russian researchers to conduct the necessary research and make it public. Russian biologist Alexey V. Surov published his findings in the Doklady Biological Sciences and showed that hamsters fed with GM soy have a fivefold higher death rate by the second generation and are completely infertile by the third. Much the same effects were observed by other scientists in Russia, Italy, and Austria, as well as by farmers and medical practitioners in India and

[277] Willim F. Engdahl, Seeds of Destruction: The hidden agenda of genetic manipulation, Global Research, 2008.
[278] De Vendemois, JS; Roullier, F; Cellier, D; Seralini, GE (2009). "A Comparison of the Effects of Three GM Corn Varieties on Mammalian Health". *International journal of biological sciences* **5** (7): 706–26. DOI:10.7150/ijbs.5.706. PMC 2793308. PMID 20011136. http://www.pubmedcentral.nih.gov/articlerender.fcgi?tool=pmcentrez&artid=2793308.

America.[279] It is no coincidence that since the introduction of GMOs in 1996 there has been a corresponding upsurge in low birth weight babies, infertility and cancer in the USA.

The gagging of scientists by government administrators in charge of vital institutions like the Food and Drug Administration (FDA) has two interlinked objectives: first, to promote GMOs and industrial food production by hiding their damaging effects on human health and the environment and, second, to attack organic farmers and natural food producers through false science and oppressive policies so as to eliminate them as an alternative source of healthy food. The state institutions formed to protect our health and food safety have in reality been re-tasked to achieve the opposite.

Scientists who attempt to whistle-blow are dealt with in the harshest ways and have their careers and lives destroyed. It was recently discovered that the FDA uses spy software to conduct surveillance on its scientists and to pre-emptively fire those who try to expose the agency for practices that endanger public safety. To set an example and terrify scientists the FDA sought to convince the Inspector General to launch criminal investigations against five of its scientists for allegedly leaking confidential information and conspiring with outside medical researchers, journalists and Congressional officials to put out negative and defamatory information about the agency.[280]

The US government is actively raiding and prosecuting farmers who grow natural foods. No other explanation for this bizarre behavior makes sense other than the government's intent to deny consumers a healthy alternative to the industrial poison produced by biotech and agro-business giants. Organic fruit and vegetables as well as unpasteurized milk and fresh meat from grass-fed animals bought directly from the farmer cannot be manipulated into a toxic weapon.

The war on people's health and fertility waged by the unholy alliance of Big Food, Big Pharma and Big Government is best exemplified by the lawsuits Monsanto routinely files against farmers whose natural crops have been genetically contaminated and from whom the company, paradoxically and unashamedly, demands royalties.

Farmers are beginning to fight back. In the United States, the Public Patent Foundation filed a landmark lawsuit in March 2011on behalf of 270,000 people from sixty organic and sustainable business and trade associations to invalidate Monsanto's patents on genetically modified seeds and to prohibit the company from suing those whose crops become genetically contaminated through no fault of their own (Organic Seed Growers and Trade Association, et al. v. Monsanto, et al., U.S. District Court, Southern District of New York, Case No. 11 CIV 2163). The plaintiffs argue that patents which poison people and the environment and that are not useful to

[279] *Genetically Modified Soy Linked to Sterility, Infant Mortality*, http://www.responsibletechnology.org/article-gmo-soy-linked-to-sterility.

[280] Eric Lichtblau and Scott Shane (14 July 2012), *"Vast F.D.A. Effort Tracked E-Mails of Its Scientists"*, The New York Times. http://www.nytimes.com/2012/07/15/us/fda-surveillance-of-scientists-spread-to-outside-critics.html?pagewanted=1&_r=2.

society, two hallmarks of US patent law, are invalid. They further argue that Monsanto has used its dominant position to limit competition from other herbicide producers and has artificially spiked the cost of seeds so that in a decade corn seed prices have increased 135% and soybean 108% and farmers are now forced to spend 16.4% of their income on seeds as opposed to 4-8% as recently as 1997.[281]

The GMO invasion, which saw the merger of Big Pharma with Big Food, comes on the heel of rapid consolidation of America's agriculture during the seventies and eighties when family farmers were driven off the land through forced sales and bankruptcies to be replaced with factory farms owned by agribusiness giants that gained a virtual monopoly.

As hundreds of thousands of farmers lost their livelihoods agribusiness profits have increased and the industry is currently the second most profitable after pharmaceuticals with sales in the US exceeding $400 billion.

Despite its profits agribusiness receives tens of billions in annual subsidies and is aided by preferential government policies. In 1996, for instance, the Farm Bill suspended the Secretary of Agriculture's power to balance supply and demand so that agribusiness could produce as much as they want and no less than they need to control market forces. Overproduction forced down prices and crushed family farmers providing opportunities for cheap land acquisitions that led to even more consolidation.

Similar methods were employed abroad to give biotechnology companies a foot in the door. Argentina and Brazil provide perfect examples. When the economic crisis hit Argentina in the late 1990s foreign investors were allowed to purchase vast tracts of land from bankrupted farmers who sold it for pennies on the dollar. Shortly after Carlos Menem, a privatization and deregulation proponent, took office in 1989, Argentina became a *"secret experimental laboratory for developing genetically engineered crops"*. Monsanto began planting Roundup Ready (RR) soybeans commercially in 1995 and by 2004 nearly half its crop land was taken by GM soybeans and became second only to the US in GM crops with 34 million acres under cultivation.[282]

Much the same story occurred in Brazil, where GMO seeds were legalized in 2005 and by 2006 the US, Argentina and Brazil accounted for over 81% of world soybean production, which ends up being fed to animals across the world. The immediate losers are the farmers whose fields are being poisoned by aerial spraying of the nearby giant GMO plantations and whose crops are contaminated. Already, genotoxic and cytotoxic effects, which are a prelude to cancer, birth defects and reproductive problems, and are traced back to Monsanto's weed killer Roundup, have been recorded in blood samples from exposed residents in Argentina.[283] In the long run, the

[281] Organic farmers Sue Monsanto over GMO Seeds, 5 April 2011, http://thewatchers.adorraeli.com/2011/04/05/organic-farmers-sue-monsanto-over-gmo-seeds/.
[282] Willim F. Engdahl, *Seeds of Destruction: The hidden agenda of genetic manipulation*, Global Research, 2008.
[283] *Glyphosate Toxic to Mouth Cells & Damages DNA, Roundup Much Worse*, By Dr. Eva Sirinathsinghji, 28 March 2012: http://www.i-sis.org.uk/Glyphosate_Toxic_to_Mouth_Cells.php.

effects will be felt by all mankind when women can no longer conceive and the babies of those who can die at birth.

In India where transgenic cotton has become ubiquitous, farmers commit suicide by the thousands being unable to keep up with the inflated price of Monsanto's GM seeds and proprietary insecticides or as their GMO crops fail. In 2009 alone, 17,638 formerly independent and traditional Indian farmers have committed suicide[284] in what has been labeled *"The GM Genocide"*[285], oftentimes by drinking the very same insecticide Monsanto supplied them with. The families left behind struggle to fight off starvation, just as the world's leaders have intended it. With 60% of its 1.2 billion population involved in agriculture, India is the foremost target of the depopulation camp, which is why there is a full-fledged attack on the country's traditional and sustainable farming community. Far from solving the world's hunger problems, the much touted "Gene Revolution" is killing people at an unprecedented rate as GMO crops fail, resistant super weeds develop, crop yields drop, farmers are forced to use more herbicides and are locked into high user fees, and the soils are killed.

5 Million Indian farmers have sued Monsanto for bio-piracy in an effort to stop the company from patenting life and from forcing farmers to pay royalties for the right to buy and plant seeds.[286] Similar lawsuits have been launched in Brazil, Argentina and elsewhere. A handful of countries with informed citizens and sympathetic governments have banned GMOs altogether despite pressure from Washington and the WTO[287]. These countries will have relied on empirical evidence such as that presented by a prominent French review of nineteen studies, which shows that animals fed GMOs develop liver and kidney problems and whose authors have warned the European Food Safety Authority (EFSA) that *"in order to protect large populations from unintended effects of novel food or feed, imported or cultivated crops on a large scale, chronic 2-year and reproductive and developmental tests are crucial"*.[288] The EFSA has so far refused to heed the warning.

To recap:

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[284] *Every Thirty Minutes: Farmer Suicides, Human Rights, and the Agrarian Crisis in India*, Center for Human Rights and Global Justice at the New York School of Law, http://www.chrgj.org/publications/docs/every30min.pdf.

[285] *The GM genocide: Thousands of Indian farmers are committing suicide after using genetically modified crops*, by Andrew Malone, 2 November 2008, The Daily Mail: http://www.dailymail.co.uk/news/article-1082559/The-GM-genocide-Thousands-Indian-farmers-committing-suicide-using-genetically-modified-crops.html

[286] *5 Million Farmers Sue Monsanto for $7.7 Billion*, by Anthony Gucciardi, 5June 2012, Natural Society: http://naturalsociety.com/5-million-farmers-sue-monsanto-for-7-billion/

[287] The countries that have banned GMOs are: Japan, New Zealand, Austria, Greece, Poland, Ireland, Hungary, Bulgaria, Luxemburg, France, Switzerland, Egypt, Madagascar, Peru, Ecuador and Venezuela.

[288] Gilles-Eric Séralini, Robin Mesnage1, Emilie Clair1, Steeve Gress, Joël S de Vendômois and Dominique Cellier, *Genetically modified crops safety assessments: present limits and possible improvements*, 1 March 2011, http://www.enveurope.com/content/23/1/10.

1. GMOs have spread incomprehensively fast considering the bitter opposition from the public and scientists;
2. are subject to proprietary laws and are enforced by patents that are patently absurd and cannot be legally justified but have nevertheless been defended in court again and again;
3. make no economic sense as they force farmers to buy seeds that they previously saved from their own stock;
4. create absolute dependence on oversees corporations not just for seeds but also fertilizers and proprietary herbicides leading to absolute loss of national sovereignty and individual choice;
5. are owned and controlled by only six corporations of which Monsanto has by far the largest share of the market, making for a very vulnerable market that could be easily destabilized by natural or man-made causes, which is an unacceptable risk to global food security;
6. are worse, no better or only marginally better than natural seeds depending on the crop;
7. deplete and degrade the soil much faster than traditional plants;
8. owe their success to political support in the US and to legal manoeuvering at the WTO whose patent rules were written by the biotech giants themselves and whose rulings are industry-friendly and ignore consumer demand and national sovereignty;
9. violate Biosafety Protocol;
10. they alone are exempt from labeling in the US and Canada to deprive consumers of choice;
11. their damaging effects on human health and the environment are kept secret by preventing independent research;
12. restrictions on research force regulators to make crucial decisions based solely on research sponsored and approved by the patent owning corporations, who have an absolute stranglehold on scientific research and the flow of scientific information;
13. scientists have complained that they are prevented from doing research for the public good by technology/stewardship agreements that give seed companies veto power over their research;
14. scientists who try to publish research that shows the harmful effects of GMO are sued, fired, discredited, deprived of funding, or forced into early retirement, ignored by the media, threatened, intimidated and bankrupted;
15. scientists who publish research that praise GMOs are funded, promoted and given media attention;
16. research incontestably shows that GMOs inhibit growth, damage internal organs, cause infertility and abnormalities, damage the immune system and cause structural changes in the white blood cells that make animals more vulnerable to infection and disease and put them at greater risk of cancer;

17. research incontestably shows that the proprietary pesticides used on GM crops cause genotoxic and cytotoxic effects, which are a prelude to cancer, birth defects and reproductive problems;
18. the industry is funded and promoted by known eugenicists and is viewed by the US government as a weapon against the developing world;
19. irreversibly contaminate traditional crops and destroy biodiversity;
20. have bankrupted and displaced millions of farmers from their land in the US, Brazil, Argentina, Africa and elsewhere contributing to widespread unemployment at a time when employment is supposedly the highest priority on the agenda of governments
21. has driven tens of thousands of farmers to suicide in India;
22. command astronomical prices for seeds and herbicides that harm farmers financially;
23. have caused more lawsuits and backlash than any other industry despite their exclusive protections under the law and massive global PR propaganda;
24. have skewed legislation to favor their spread, destroy the organic food industry, deprive consumers of choice and fully industrialize food production;
25. have forced all countries to accept a medley of new biotech patents covering genes, cell lines, organisms and living processes that turn life into commodities.

Are we to believe that these paradoxical and irrational developments in relation to food are simply the accidental results of market forces and the drive for profit when they in fact are responsible for far more economic loss than gain once employment, social, health, genetic and environmental factors are considered? No market force is strong enough to skew society, damage universal wellbeing and threaten life in such fundamental ways.

The reason for their success can therefore only be attributed to a cause important enough to justify the horrendous price we are all paying. And that cause is a global effort at the highest level of international governance to use food as a weapon against people and reduce the population in ways that allow governments to blame prices, drought, crop failure, and market conditions for the mass murder and genetic downgrading of their own citizens. No other explanation fits the bill for no other objective could have coalesced the global elite in common purpose to dare commit global genocide and risk being lynched by the multitudes they have scheduled for extermination.

What we can conclude is that much of the industrial and all of the genetically modified food we eat is designed to degrade our genetic material and is being forced on us with the clear intent to make us sick and reduce our fertility in the short run, and to kill our genetic lines in the long run. The executive decisions that have put GMOs in our food around the world are being opposed by scientists and consumers alike but have no effect on policy or on legal decisions because the objective is to use food as a weapon against humanity for as long as possible and until as many people as possible are killed or genetically damaged.

The plausible deniability our leaders will use once their plan is uncovered and the people will want to put them in front of a firing squad is that they had no way of knowing the consequences would be so damaging. Long before we get there, however, they will have engineered massive famines in the world and especially in the thirteen countries the Kissinger Report has designated for population reduction, namely: India, Bangladesh, Pakistan, Indonesia, Thailand, the Philippines, Turkey, Nigeria, Egypt, Ethiopia, Mexico, Colombia and Brazil.

It is no surprise that five of the thirteen countries on Kissinger's list – Brazil, India, Pakistan, the Philippines and Mexico – are already among the world's largest producers of transgenic crops.

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In 1945 the terror of war was a hellish reality that no one wanted to repeat ever again. It was resolved to keep the peace by any means necessary and nuclear deterrence dictated the method, self-imposed population control. The 60s was what we might call the axial age of demographic and environmental enlightenment, whereas the 90s was the do or die time, when the final decision to eradicate all but a few hundred thousand chosen human beings was made in cold blood and with utter disdain for mankind. The new millennium was started with the big bang of 9/11 which marked the beginning of the Final Solution.

Our leaders, regardless of their political stripes or colors – or whether they lead a democracy, a dictatorship, or anything in between – have turned on us and have scheduled us for destruction in order to save the planet for themselves, and what will be left of human civilization. But they have chosen the way of the coward and will not succeed because their plan is based on deceit and self-interest, on murder and secrecy, on hatred and perversion, and because I stand in their way and soon all of you will stand with me.

World War III has been ongoing since the 1950s and is not only in progress as we speak, but has entered its most destructive phase yet. It has already taken at least a billion lives in the 20th century by preventing their moment of conception and has terminated some 30% of the world's bloodlines. It has also claimed hundreds of millions of lives through diseases caused by man-made viruses like HIV and god knows how many others. It has also maimed and devastated hundreds of millions of lives through immunological, neurological and genetic illnesses caused fully or partially by fluoridation and more recently by genetically modified organisms. Without knowing it, we have been at the receiving end of this chemical and biological warfare and our leaders and governments have been on the opposing side. The casualties of this one-sided and silent war are unimaginably high and somewhere in the vicinity of 2 billion people. This war has also claimed the health of one-third of humanity. The murderers at the helms of our countries have redefined the meaning of war and have made the Nazis and the fascists of the past century look like petty criminals.

7 billion is not a sustainable population and everyone who says otherwise is either irresponsible or has had too much fluoridated water to drink. But that does not forgive the methods they have chosen to keep our numbers in check throughout the 20th century and to exterminate us in the 21st century. It does not forgive the shameless disregard for the sanctity of life, the breach of trust, the violation of innocence, and the harm done to millennia of natural evolution. It does not forgive their lack of courage and failure to stand before us and say loud and clear that unless we do it willingly our children will live in utter misery and our children's children will choke to death on the filth we left behind. We are rational human beings and we understand. Those who refuse to understand will be made to understand by those around them who think and act rationally; by us. We are ready to take responsibility and to willingly reduce ourselves to just one child per family from now until our numbers descend down to at most 2 billion, which is all the earth can support and which is a number we can feed when fossil fuels run out in the not so distant future.[289]

There must be a minimum of 100,000 people worldwide employed directly by the global depopulation project and ten times as many employed indirectly. The vast majority of them have no clue they are accessories to history's greatest genocide. They do their small part knowing or at least sensing that what they are doing is wrong if not immoral and criminal, but they comfort and deceive themselves with the notion that they are part of a great design and employed by the world's most respected and mighty organizations and that therefore what they are doing must be for the greater good. Of course, deep down they know these are false comforts and that they have sold their souls for self-interest and the egotistical calculation that in a world where half of humanity is unemployed and starving doing any job, however despicable, is justified by the law of survival. So they willingly allow themselves to be steered not only towards their own destruction but to the destruction of their own children, their bloodlines and of humanity itself by a few thousand individuals who delegate the global depopulation agenda by pulling their puppets' strings from positions of power.

Before anyone gets sanctimonious, however, let's not forget that we are in this mess because men, all men, have lost their courage and abandoned their consciences to adopt indifference and pursue self-interest. The inevitable result of this behavioral equation is the Final Solution, for in so doing men have diluted the meaning of human dignity and with it respect for the sanctity of life. Men everywhere have become despicable cowards and willing sheep. I dare say there is hardly one in a million who even deserves to be called a man.

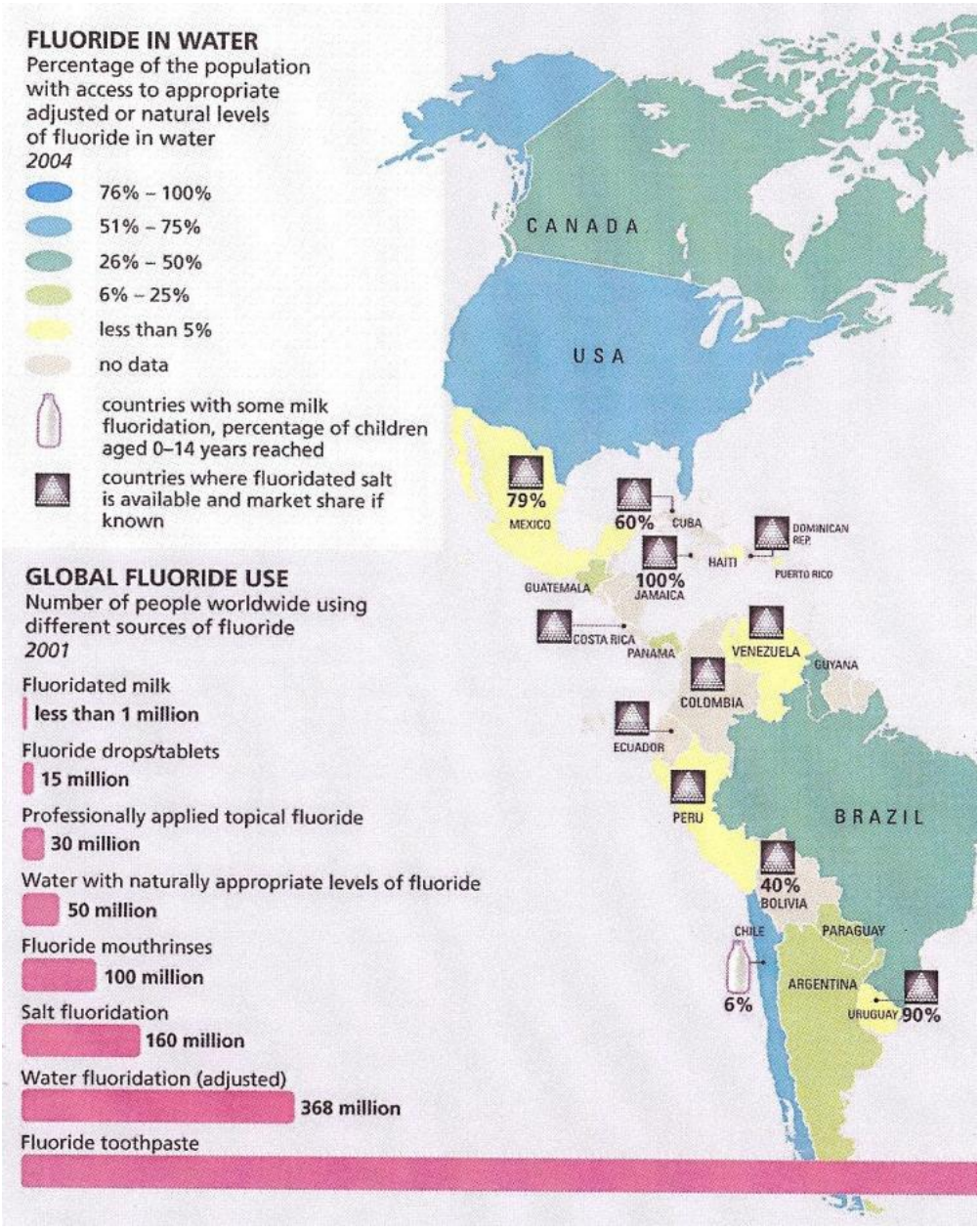
If we continue to act like sheep we will be treated like sheep and deservedly so. We have already been sheered of our rights and liberties and said and did nothing. Our reproductive abilities and with them our male prowess have also been sheered. Undoubtedly, that is why men everywhere have become cowards. It is fair to say that our balls have been cut off, both literally

[289] Dale Allen Pfeiffer, *Eating Fossil Fuels*, Wilderness Publications, 2004, http://www.fromthewilderness.com/free/ww3/100303_eating_oil.html.

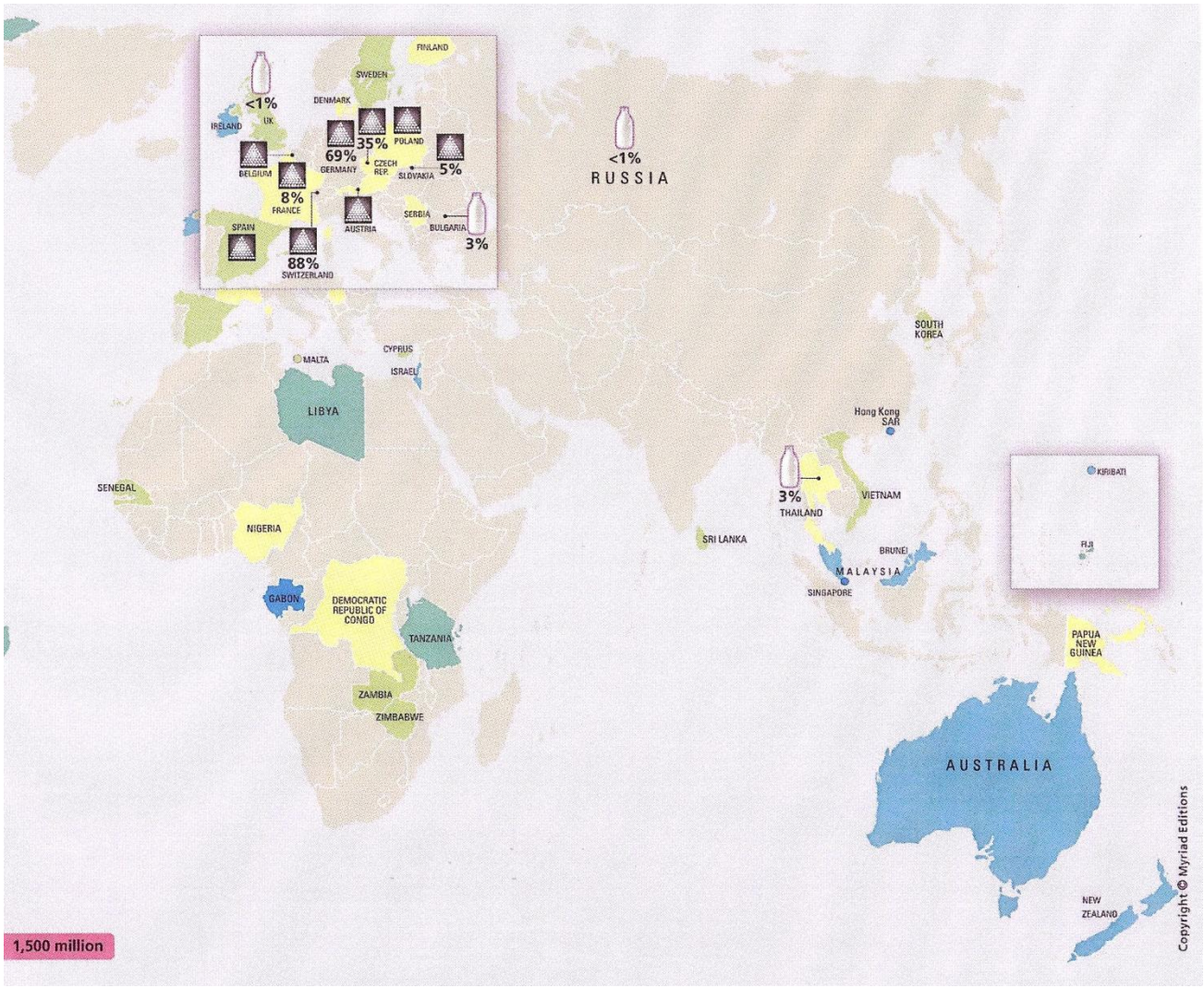
and figuratively, but we continue to do nothing except bleat a few meek complaints. Soon we will be sheered into extinction and our chance to say and do something will be forever gone.

## GLOBAL FLUORIDATION STATUS

The fluoridation map I am presenting here comes from the Oral Health Atlas of 2009[290] and shows only the official side of fluoridation. The true state of the global fluoridation program is difficult to ascertain but it is safe to assume that with the exception of a few countries in Africa the entire world is fluoridated in one way or another.




[290] Beaglehole R., Benzian H., Crail J. & Mackay J., *The Oral Health Atlas: mapping a neglected global health issue*. Geneva & Brighton: copyright FDI World Dental Education Ltd. & Myriad Editions Ltd. 2009, www.myriadeditions.com.


FINLAND
SWEDEN
DENMARK
<1%
UK
IRELAND
69%
GERMANY
35%
CZECH REP.
POLAND
5%
SLOVAKIA
BELGIUM
8%
FRANCE
AUSTRIA
SERBIA
BULGARIA
3%
SPAIN
88%
SWITZERLAND
<1%
RUSSIA
SOUTH KOREA
MALTA
CYPRUS
ISRAEL
LIBYA
Hong Kong SAR
3%
THAILAND
VIETNAM
SENEGAL
NIGERIA
SRI LANKA
BRUNEI
MALAYSIA
SINGAPORE
KIRIBATI
FIJI
GABON
DEMOCRATIC REPUBLIC OF CONGO
TANZANIA
PAPUA NEW GUINEA
ZAMBIA
ZIMBABWE
AUSTRALIA
NEW ZEALAND
1,500 million
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## HOW TO PROTECT OUR CHILDREN

Fluoridation is now endemic and systemic which means that the only way to protect ourselves and our children fully is by shutting it down across the world. To do so we must take over the leavers of national and international governance.

Fluoride-containing compounds are used in toothpaste, mouthwash, supplements, topical applications, pesticides, post-harvest fumigants and medical products. In addition fluoride gets into processed food and meats where fluoridated water is used. Fluoride is found in all soda drinks, fruit juices and even in milk and milk products. Alcoholic drinks such as beer and wine also contain fluoride.

Until we unseat the enemies of mankind from positions of power and take control of our own destinies, we can protect ourselves only from the main sources of fluoride contamination, which is fluoridated tap water, salt and milk. We can also minimize our exposure to fluoride from toothpaste by using children's toothpaste (or non-fluoridated toothpaste when we can find it), staying away from mouth rinses, and by flushing thoroughly with distilled water every time we brush our teeth.

To de-fluoridate our tap water, common water filters will not work since the diameter of a fluoride anion is very small (0.064 nm) and will pass through, and neither will activated carbon filters or water-softeners. There are only three equally effective methods of de-fluoridating water and I am listing them here in order of cost, starting with the least expensive:

1. distillation
2. reverse osmosis
3. activated alumina adsorbent cartridges

In addition we can pursue fluoride detoxification by taking the following:

1. calcium gluconate (is very effective and the only fluoride detoxification drug)
2. triphala (a herbal health product from India)
3. Vitamin A and E

Detoxification by either calcium gluconate combined with vitamin A and E or by triphala combined with vitamin A and E will only protect us in a limited fashion until we have access to de-fluoridated drinking water. Therefore, you should not take false comfort in these temporary and limited protection measures in order to avoid doing your part by going into battle against our leaders.

If you choose to hide like a rat you will die like a rat and you will deserve to die like a rat. Remember that for every one of them there are at least one hundred thousand of us and this means that we have nothing to fear as long as we act together.

## ADDRESS TO LEADERS

As mass murderers who have committed crimes against humanity you have forfeited the powers we the voters have bestowed onto you by electing you to high office.

The best you can hope for is a choice between execution and life-imprisonment. But if you bow out gracefully and go into voluntary house arrest until you are picked up by representatives of the People's Protection Force and taken into custody, we will consider more lenient ways in which to punish you. Should you, however, so much as raise a single hand against us we will pursue you with extreme prejudice.

If you are innocent you will be found innocent and released, but you will never be allowed to hold political office or positions of leadership ever again. For our protection, we the people must assume that you were aware but have chosen to remain silent about the chemical and biological warfare governments have been waging against us and the more recent Final Solution.

To those of you who are Presidents, Prime Ministers or Heads of State by whatever title, the People's Protection Force (which includes every human being on earth who has never held political office or participated in the global depopulation program) allows you one last executive power with the following components:

1. the dissolution of your country's intelligence services
2. the removal of all border controls
3. the preservation of all classified documents and their immediate public release on the Internet
4. the cancellation of all propaganda and censorship measures throughout the system
5. the deactivation of all nuclear weapons
6. the transfer of control over your military forces to the People's Protection Force

You have 48 hours from the time you receive this document to carry out your last executive order.

You have turned our countries into concentration camps and our lives into indentured slavery. You have treated us like bugs and humankind like an infestation and have degraded our genetic and intellectual makeup. Most egregiously you have poisoned our innocent and defenseless children from infancy. These are unforgivable crimes and no demographic or environmental imperative can justify them, especially since there has always been another alternative.

You have sickened our world, turned the rule of law upside down and made our rights and liberties a farce. You no longer deserve a place among us.

## ADDRESS TO MILITARY AND POLICE FORCES

The People's Protection Force asks all military and police forces on the planet to deploy in full force and to ensure the protection of citizens from the executive, legislative and judiciary branches of government that will attempt to harm us and to prevent us from bringing them to justice for the heinous crimes they have perpetrated against humankind.

The People's Protection Force herewith empowers all rank and file soldiers to accept orders only from officers and superiors who declare their allegiance to the people of the world and who abjure the previous command structure and openly refute the authority of their current Head of State.

The People's Protection Force asks all high ranking officers and the command structure of the armed forces of any and all countries to seal off all buildings used by intelligence services and to place under arrest the members of the upper echelon of these organizations until such time as the People's Protection Court will judge them.

Until the People's Protection Force establishes a command center, military leaders will carry out their functions independently with the aim of preserving order without impeding the people's free movement and the right to assemble in large groups in order to pursue the political objective of unseating the existing leadership and world order.

The military and police will offer citizens the necessary fire power to take out any pockets of resistance by the political establishment and the intelligence apparatus.

The military and the police will work hand in hand to protect private and public property from destruction and to ensure that political transition from national authorities to the People's Protection Force occurs with as little bloodshed as possible.

Under no circumstances should the military even dream of assuming political power and control from civilian authority. The People's Protection Court will not tolerate oppressive military rule and will certainly not tolerate military dictatorships.

I remind the military personnel of the United States and Canada that you and your families have been subjected to water fluoridation at any and all military bases and installations in North America. It is the law of both Canada and the US that you and your families are to drink poisoned water. This law has been in place for one and one purpose only, to rob you of the ability to think clearly for yourselves by altering your neurological state and brain functions into a state of blind submission.

Our enemy is therefore your enemy. Forget not also that you are our sons and daughters and that in taking orders from the criminals in charge of government you would be turning your weapons against your parents, brothers, sisters and friends; against the very communities that have raised you and against the only people who love you.

## PLAN OF ACTION

This is the perfect opportunity to turn adversity into advantage and to use that advantage to transform the world in the most fundamental ways.

To do so we must act in concord with people of all races and all nations and must do so now. It is the first chance history has provided us with to reach out to one another in common purpose and to forge one civilization and one nation on planet Earth. This is the silver lining in this sordid 70-year-old cloud of poison and betrayal.

No one now in government and high administrative positions can ever be allowed anywhere near positions of authority. They have not only sterilized hundreds of millions of us, prevented the birth of at least a billion children and extinguished millions of genetic lines, they have also degraded the intellectual abilities of humanity and undermined our health and genetic endowments in fundamental and highly detrimental ways. It will take us centuries to recover.

At the same time we must recognize that the demographic goals the enemies of mankind have set are an absolute and inevitable necessity that we must pursue of our own free will by implementing a global one-child policy until our numbers are sufficiently low to live within the planet's means and without destroying the integrity of Earth's ecosystems and threatening all life on the planet with extinction.

Every time I speak to someone on the subject I hear the most racist remarks from the lips of people who are otherwise quite decent and tolerant. They argue that it is the Indians and the Chinese who must reduce their numbers not us. It is they who are too many and are running out of space and resources, not us. They conveniently forget that the reason we Europeans are not running out of space is because we have taken other people's lands for the past five centuries and killed the rightful and original inhabitants in the process. We were the only race to migrate out of our geographic space and by sheer force encroach on others when we outgrew our land or to indulge our greed. It is not the Chinese or the Indians who stole the land of the Africans, the Aboriginals, the Maoris, and of the native Indians from the Arctic Circle to the tip of Patagonia; it is us, Caucasians. Imagine how crowded we would be in Europe if we did not have all this extra space to lavish on. But that is not something my fellow Caucasians want to hear. It is not convenient for their prejudices, which are carefully nurtured and sheltered from reason by self-delusion and mass denial. Forget also not that there are more Caucasians on earth due to our aggressive nature than there are Chinese or Indians.

We can no longer afford that kind of thinking and that kind of base prejudices. We have been punished severely by our own leaders who gave up on us and forged memoranda of understanding with one another because they, unlike us, have been able to overcome their prejudices. Racism, prejudice, greed and ignorance are the true and only terrorists and they reside within us.

At the same time, the nations that refuse to think in global terms and continue to multiply like rabbits with dire effects on the socio-economic conditions of every member of society and on the immediate and global environment, must be made to understand by persuasion or by force that such primitive and irresponsible attitudes will not be tolerated by mankind, as they threaten the very survival of the species. The one-child policy must be universal and must be applied without exceptions until it can be calibrated to take into consideration every factor necessary for a sane and intelligent policy, at which point regions that have reached self-sustainability can resume replacement level TFR; that is, two children per couple.

Our life is about to change radically once we run out of oil and we have at most a century to thin our numbers, develop a global infrastructure for renewable energy, and transform industrial agriculture back to natural ways of food production.

The awesome responsibility of power and the accountability for failure no longer fall on our leaders' shoulders they fall on our own. We must exercise our responsibilities in the knowledge that our lives and our children's lives depend on whether we succeed or fail. We have no excuses and no leaders to blame for our own shortcomings.

The first order of business is to disempower the criminals who have done this to us. Unfortunately, we cannot get rid of them without due process, as much as we want to. We too bear responsibility for being negligent and indifferent. This means that we must do this with restraint and in an orderly fashion according to the following action plan.

Before we even begin to hunt down the criminals in power we must disseminate this document in all corners of the world. It is up to all of you to do this without delay. Proceed as follows:

1. Make at least 100 CD-ROM copies and distribute them to everyone you know and trust within 24 hours of receiving this document. Hand them out personally; do not send them by email. Avoid politicians, judges and high ranking civil servants. Avoid also any and all government organizations and non-governmental organizations. Amnesty International, Human Rights Watch and other such giants have long been co-opted and have as much blood on their hands as our politicians.
2. Within the next 48 hours send CD-ROM copies by mail to family, friends and acquaintances who live far away and to those who live abroad. If you have the financial means then courier these envelopes for overnight delivery. We face a global political infrastructure of criminals and we can only take them down if we act together across borders.
3. Seven days after you have received this document and have completed the distribution of copies in person and by mail, you can start emailing a digital copy of this document to anyone you know. Finish your email's text with a post scriptum asking for confirmation of receipt. You should expect the authorities to tag the PDF file of this document so as to stop it from being sent via email. If you receive no email confirmation then you must

rename the PDF file and resend it. If again you receive no email confirmation pick up the phone and explain the situation verbally.

I cannot begin to tell you how important this first stage of the coming global revolution is and how everything else hinges on it being carried out successfully. I expect it will take a month for this document to reach a quarter of the world's population, at which point we will have the strength of numbers and no governmental power can stop us. When we are that far, begin implementing the next steps.

## I. DISABLE THE EXECUTIVE, JUDICIARY AND LEGISLATIVE BRANCHES OF GOVERNMENT

1. Place all politicians, starting with the Prime Minister/President and his/her cabinet/administration, under house arrest until you decide the appropriate punishment for their genocide locally and among yourselves. Confiscate all their communication equipment (computers, cell phones, beepers, etc.). Interrogate them day and night until they confess or are proven innocent and video and audio record the interrogations. Make sure at least three interrogators are in the room with the subject. You have elected them into office and it is up to you to judge them for the crimes they have perpetrated against you. Do not wait for the judiciary. Judges have been part of the depopulation agenda from the very beginning. Once you reach your verdicts punish them accordingly. Do not be afraid to hand out capital punishment verdicts and to carry them out immediately, if that is what the evidence and their level of culpability dictate.
2. Place all high ranking bureaucrats, especially those from health and food safety related institutions, under house arrest and deal with them the same way as you will have dealt with your elected officials. Be mindful that some of them have been on our side and have published honest research to make us aware of the danger. Others, however, are spineless criminals who have sold their souls for positions of authority they least deserve. Deal with them accordingly.
3. Place all Supreme Court judges and all lower court judges under house arrest and subject them to the same swift hearings as their political counterparts. If you find them guilty it is up to you to punish them as you see fit, whether it be imprisonment or execution. Once again, do not wait for outside help or higher authorities. All higher authorities have colluded against you and must be assumed to be hostile.
4. While national leaders are well known public figures, international leaders operate from positions of relative anonymity. To ensure they do not slip through our fingers, the People's Protection Force has assembled a short list of high value individuals designated as ENEMIES OF MANKIND and has issued global arrest warrants. Unless they turn themselves in, the list will be made public and these

wanted mass murderers and war criminals will be hunted down, captured and brought to justice by any means necessary. These are extremely dangerous individuals as they command wealth and power and have unlimited resources at their disposal.

*To achieve this:*

- Form groups of neighbours, family and friends and place your local MP under house arrest.
- Do not attempt to place a politician, bureaucrat or member of the judiciary under house arrest with less than 50 people and if possible at least one police officer.
- Ensure at least some of you in every group have firearms. If possible, engage the police (no high ranking officers, they may be compromised)
- If possible engage the military (no high ranking officers, they may be compromised)
- Do not hesitate to act and do not hesitate to be judge, jury and executioners. If you hesitate you will die, for the criminals who have been murdering our children and making us sick for 70 years have never hesitated and will certainly not hesitate when their heads are on the chopping block.

WORD OF CAUTION: **I remind you not to forget your compassion in the heat of anger. In dealing with these animals you must not become one. This will undoubtedly be the hardest part of the tasks that await you. As despicable as we find them, we must have sympathy and show them that we have higher standards than theirs. Ultimately, we must remember that for better or worse they have saved us from ourselves and have potentially averted greater tragedy than they have caused in the exercise of their best judgment and the limitations of circumstances.**

## II. SECURE VITAL INFRASTRUCTURE AND CUT OFF THE HYDRA'S HEADS

1. Secure all water treatment plants and aquifers to stop our leaders from poisoning our water sources and put them under 24 hour protection (remove all fluoride from the premise, be careful it is highly toxic). This is of the highest importance as that is exactly what they will first do, up the fluoride content in our water.
2. Take over all newspapers, television and radio stations and ensure that they publish and broadcast every sordid detail of the fluoridation agenda and inform the public about the ongoing genocide. Make sure the government has no access to the media as they will use it to pursue psychological warfare, as well as to lie and demoralize you back into submission. The existing editors-in-chief must be removed from their positions immediately as they have been an integral part of the depopulation agenda. Deal with them as you will have dealt with the

politicians. All other media people who refuse to cooperate are accessories to mass murder and must be dealt with accordingly.

3. Take over the headquarters of all banks and national banks and shut down the bank accounts and credit cards of all politicians and high ranking public servants to ensure they cannot go into hiding or flee the country.
4. The people of the United States of America, Belgium, France, Italy and Switzerland have the added task of shutting down the buildings and arresting the representatives of all members states at the United Nations (in New York), the high ranking bureaucrats and technocrats at the EU institutions (in Brussels and Strasbourg), the World Bank Group (1818 H Street NW, New York), the World Health Organization (Avenue Appia 20, Geneva, Switzerland), the Rockefellers Brothers Fund (475 Riverside Drive, Suite 900, New York), the Rockefeller Foundation (420 Fifth Avenue, New York), the Food and Agricultural Organization (Vialle delle Terme di Caracalla, Rome, Italy), and the United Nations Population Fund (605 Third Avenue, New York).
5. To succeed we must also cut off the economic and political heads of the international hydra to succeed. These heads are the Bilderberg Group (no fixed address in Europe), the Council on Foreign Relations (The Harold Pratt House, 58 East 68th Street, New York & 1777 F Street, NW, Washington, DC) and the Trilateral Commission (1156 Fifteenth Street, NW, Washington, DC; 5, rue de Téhéran, 75008 Paris, France; 4-9-17 Minami-Azabu, Minato-ku, Tokyo 106, Japan).

## III. ORGANIZE ANAD TAKE CONTROL

1. Organize at the local level by forming two entities; one for local governance to ensure that essential services and law and order continue and one to represent you at the national assembly of the People's Protection Force when it will be ready to take place in your country.
2. Do not organize by political orientation but choose a cross-sectional representation. The days of party politics are over.
3. Choose only one person to represent your town or city at the national assembly, which will take place when the People's Protection Force is ready to convene the first round of national meetings. There should be one candidate for every 100,000 people, which means that smaller towns and rural counties need to amalgamate and send only one representative.
4. At the first round of national meetings country representatives will be chosen from among the delegates sent by localities. For every one million people there will be one representative chosen to replace those previously appointed by their governments to the United Nations. The newly chosen individuals will represent

their country at the United Nations and will help transform the organization into a global parliament at which point it will be renamed.

5. Large and/or numerous nations such as Russia, Canada, the United States, China, Australia, Brazil, India and Argentina will have to organize at the state or provincial level and send one representative for every state/province to the national assembly.

Act immediately and do not hesitate. No one will help us unless we help ourselves. We have the strength of numbers and the immeasurable powers of truth and justice behind us. Be fearless!

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It is now time to unite in common cause and create a better world for this and future generations.

We have paid for our racism, for our prejudices, for our hatreds, for our greed and for our indifference. And we have made our children pay for our cowardice.

We must all be brave hearts from now on and live with clear purpose and firm principles.

It is not about us anymore; it is about our children and our planet. Upon our generation falls history's greatest task, that of forging a common purpose and of saving the planet and humanity from ourselves.

LET THIS MONUMENTAL WORK BEGIN NOW